

# C+D



**Cover story:** Damien Hirst on why pharmacy influences his art

**News:** Bharat Shah – new cat M switches could cost each pharmacy up to £20K

**News:** Views are divided on ease of recruiting for 100-hour pharmacies

**Features:** Static analgesics market awaits OTC triptans to give much-needed boost

## Solpadeine<sup>®</sup>

brings you an answer to migraine



No other analgesic is more effective against the pain of migraine without prescription

Legal category: P. Further information available from: GlaxoSmithKline Consumer Healthcare, Brentford, TW8 9GS, U.K. Solpadeine is a registered trade mark of the GlaxoSmithKline group of companies

**Solpadeine**  
MIGRAINE  
IBUPROFEN  
& CODEINE  
TABLETS

Ibuprofen, Codeine



GlaxoSmithKline  
Consumer Healthcare



# In-crease comfort

Nothing beats Canesten Hydrocortisone for treating sweat rash (Candidal Intertrigo). In fact, it's the UK's top selling OTC antifungal and hydrocortisone combination treatment.<sup>1</sup> The triple action formula provides rapid relief not just for active people, but also the overweight and those who sweat heavily. Antifungal and antibacterial\* ingredients wipe out the cause, while anti-inflammatory hydrocortisone soothes the symptoms. So recommend the name you trust, and stop the misery of sweat rash.

**Canesten®**

**HYDROCORTISONE**




ELIMINATES SWEAT RASH SOOTHES INFLAMMATION AND ITCHING

**1% hydrocortisone and 1% clotrimazole**

**Anti-Fungal. Anti-Bacterial.\* Anti-Inflammatory.**

\*exhibits activity against *Trichomonas*, staphylococci, streptococci and *Bacteroides*

#### Product Information for Canesten® Hydrocortisone

**Presentation:** Canesten® Hydrocortisone cream contains 1% w/w clotrimazole and 1% w/w hydrocortisone. **Indications:** Athlete's foot and candidal intertrigo where co-existing symptoms of inflammation require rapid relief. **Dosage and Administration:** Apply thinly and evenly twice daily and rub in gently for a maximum of seven days. **Contra-indications:** Use on face, eyes, mouth or mucous membranes; broken or large areas of skin; cold sores or  
 acne; for treatment periods longer than seven days; hypersensitivity to ingredients. Only if prescribed by doctor:

children under 10 years; pregnancy and lactation; on ano-genital area; to treat ringworm or secondarily infected skin conditions. For hydrocortisone component: any untreated bacterial skin diseases, chicken pox, vaccination reactions, perioral dermatitis, viral skin diseases (e.g. herpes simplex, rosacea, shingles). **Warnings and Precautions:** The cream contains cetostearyl alcohol, which may cause local skin reactions (e.g. contact dermatitis). Long-term continuous therapy to extensive areas of skin should be avoided. Avoid covering treated area with tight dressing. **Side-effects:** Rarely local mild burning or irritation immediately after use.

Hypersensitivity reactions may occur. After use on large areas and/or after long-term use or use under occlusive dressings, skin atrophy, teleangiectasis, hypertrichosis, striations, hypopigmentation, secondary infection and acneiform symptoms may occur. **Cost:** £2.15. **MA Holder:** Bayer plc, Consumer Care Division, Newbury, Berkshire RG14 1JA. **Product Licence Number:** PL 0010/0216. **Legal Category:** P. **Date of Preparation:** October 2005. © = Registered trademark of Bayer AG.

**Reference:** 1. IRI Unit Sales MAT, 18 Feb 2006. Bayer UK.

**Canesten®** can



## News 4-14

### Drug Tariff deficit looms 4

Pharmacists could lose £20,000 each this year, generics expert warns

### 100-hour pharmacies must be flexible 5

Potential employees put off by fears of long hours and night-time working

### PSNI appoints director and seeks registrar 6

Raymond Blaney will become the PSNI's new director on May 22, joining from Telewest

### Pharmacists top health poll 8

NI health satisfaction survey puts pharmacists ahead of doctors and dentists

### Zero discount changes cost neutral, says PSNC 10

Good news tempered by warning for contractors dispensing high volumes of ZD drugs

### MURs up despite mixed reactions 12

A year into the new contract, pharmacists share their views on the highs and lows of medicines use reviews



## Features 30-37

### Art of the matter 30

Damien Hirst talks to Max Gosney about religion, medicine and art

### No pain, no gain 32

Asha Fowells looks at the boom in OTC analgesic sales

## Recruitment & Classified 38-41

### Star job

Pharmacists and a dispenser wanted for a Leicester-area business

### On TV next week 28

### Out of Hours 42

## Opinion 16-17

Editor's comment  
PAGB Perspective  
Xrayser  
Northern Ireland  
Notebook

## Clinical 21-25

Pharmacy Update -  
Adherence (part two)  
Clinical News

## Products & Marketing 26-28

Sensodyne Pronamel;  
Aquaban; Scholl;  
Hedrin; Rennie; Optrex;  
Fortuna Ear Plugs



# Drug Tariff deficit looms as products switch categories

**Finance** Pharma boss warns of profit slump in wake of category M switches

Max Gosney

**Pharmacists could** lose up to £20,000 each this year because of changes to the Drug Tariff, a generics expert has told C+D.

Contractors face a profit slump as more medicines switch from their current category A prices to newly introduced category M, predicted Bharat Shah, Sigma Pharmaceuticals' managing director.

"The first step of reclassifying a product can lead to a big reduction in reimbursement. Lansoprazole moved categories in March 2006 and prices dropped by approximately 65 per cent, which works out at £5,000 to £10,000 loss per pharmacy," he said.

However, PSNC claimed that contractors would quickly claw back any losses. "We're working with the Department of Health (DH) to ensure £500 million remains in generics purchase profits. Each contractor will get their share of that money.

**Category A:** price is calculated from the average price of two wholesalers and three manufacturers. Reimbursement rates tend to be higher so the pharmacist makes more money.



Bharat Shah: predicts loss for contractors

Whether it is on line A, B or C, I can't tell them," said Mike Dent, PSNC's head of finance.

Generics including alendronic acid and sumatriptan could be among the next wave of 'big products' to be moved to category M by the DH this year, according to Mr Shah.

"I would estimate that these

**Category M:** cost prices are based on information supplied by manufacturers. Reimbursement rates tend to be lower so less money is made by the pharmacist on these generics.



Mike Dent: working to ensure profits remain

switches would mean a minimum of £10,000 taken away from pharmacists. But it could range up to £20,000 each," he advised.

Pharmacists must adapt their businesses to survive the revenue changes, advised Mr Shah. "To make up this money pharmacists must get involved in patient services. But it could take several months to recuperate," he added.

Mr Shah predicted increased stability for category M in the future with the DH's quarterly clawback varying around 5 per cent after the next recalibration in July 2006.

Contractors have expressed

## Your views

"These switches are not such a bad thing – as long as PSNC can keep it's side of the bargain on maintaining £500 million in purchase profits. But I wouldn't be surprised if the government changed the goal posts.

Pharmacists are going to have to work twice as hard to make the same amount of money."

**David Hawkin, pharmacist, Hawkin WA & Sons, Leeds**

"I feel devastated by the prospect of losing more money on generics. In five years, dispensing will play no part in pharmacy. I'm feeling really let down by PSNC and the direction of the new contract. If only we'd been as effective as GPs in negotiating our contract."

**Nader Siabi, Pharma Healthcare, Canvey Island**

"I've noticed the effect of category M over the past year with my script numbers increasing but payments not following suit."

**Tariq Malik, Kingsfold Pharmacy, near Preston**

disappointment about the predicted Drug Tariff changes. Rajesh Kerai, of the Queens Park pharmacy in Bournemouth, said: "We're losing out on generics. We still buy at the same price but get paid less to dispense. It would be OK if we could get the money back. But I've been told there's no chance to set up many services by my primary care trust because they're over budget."

## NPA backs Scotland's proposals

**Contract** Looks positive but must be monitored

The NPA has given provisional support to Scotland's proposed £444 million new pharmacy contract.

Outline changes appeared positive for contractors, but must be closely monitored stressed John D'Arcy, chief executive officer at the organisation.

"Capitation payments, for example, are an interesting but new territory and it will be difficult to predict, in the first year, how many patients will want to register with any given pharmacy.

"We won't really know the true effect until members start," added Mr D'Arcy. **MG**

## Wage bill for RPSGB directors tops £1.1 million

**Finance** Annual accounts show Society's top earner takes home up to £140,000

Gary Paragpuri

**Remuneration** for the RPSGB's eight directors and secretary and registrar rose by 11 per cent in 2005 to £1.148 million, the Society's accounts show.

One person was in the top wage category of £135,001 to £140,000 (excluding pension contributions) and two were in the lowest range of £25,001 to £75,000. Six earned between £90,001 and £120,000.

After accounting for tax and the pension reserve disclosure (now a mandatory requirement), the Society

### The RPSGB finances for 2005

- Income from retention and premise fees rose 33 per cent to £12.6m
- Income from publications was £17.4m

posted a deficit of £594,000 for 2005. The comparative adjusted result for 2004 was a £2.5m loss.

The pension deficit also affected the RPSGB's retained reserves, which stood at £5.2m at the end of 2005.

RPSGB treasurer John Jolley said in the accounts, published on Wednesday, that the Council believes the Society's underlying finances to be "robust".

"The Society's balance sheet is now stronger than in prior years, containing as it now does higher levels of cash as well as increased investment in fixed assets," he added.

- Council costs rose 13 per cent due to larger Council, increased activity and higher attendance fee
- Total income for 2005 was £33m
- Pension scheme liability £4.8m.

A presentation on the accounts will be given at the Society's AGM on May 24. Members with questions should submit them by May 17. The accounts can be seen at [www.rpsgb.org](http://www.rpsgb.org)



John Jolley: finances "robust"



Dr Chris Curtis, of the London School of Hygiene and Tropical Medicine, chances his arm in a tank of hungry mosquitoes to show how human skin reacts to bites. The demonstration is part of an interactive exhibition at London's Science Museum to kick off Malaria Awareness Week on Monday May 15. The campaign has joined forces with the Foreign and Commonwealth Office's 'Know Before You Go' initiative, designed to encourage UK travellers to consult healthcare professionals before visiting countries presenting a malaria risk. For complimentary tickets to the exhibition go to [www.malariahotspots.co.uk](http://www.malariahotspots.co.uk)



# 100-hour pharmacies should offer flexibility when trying to attract staff

**Recruitment** Employees fear unsociable hours and compromised safety with night shifts

A pharmacy recruitment agency is finding it difficult to fill the vacancies at a new 100-hour pharmacy in Cheshire.

Pharmfinders director Adam Goodwin wants five pharmacists and 12 dispensers/assistants for a pharmacy serving a supersurgery of 40 GPs and other healthcare professionals, but said candidates thought they would have to work long and unsociable hours.

There was also a perception that the store would be too quiet at particular times, and there were concerns about security when working late at night.

Mr Goodwin suggested 100-hour pharmacies offer part-time hours and alleviate security concerns by employing guards and providing secure parking and panic buttons.

Employers should also promote the benefits of working in such a store which offers the flexibility to move tasks such as date checking and CPD into quieter periods to ensure a more balanced workload, he suggested. This also provides the chance to work closely with other healthcare professionals and to increase pharmacy's community profile.

Mr Goodwin believes 100-hour pharmacies will lead to more locum work at better rates of pay and the chance to work three-day weeks for the equivalent of full-time locum earnings. "To attract quality candidates to 100-hour pharmacies, employers need to offer attractive vacancies with flexible hours and more diversity," he said. **JE**



Adam Goodwin: call for part-time hours and better security at 100-hour premises

## Pharmacy 365 responds to workers' security fears

**Recruitment** Technicians with families 'happy' to work evenings in late-night pharmacy

The manager of a 100-hour pharmacy in Stockton-on-Tees says he has had no difficulty recruiting staff.

The 6,000sq ft, three-storey Pharmacy 365 boasts consultation rooms, a supervised methadone unit and toilets for the disabled.

As well as dispensing 12,000 prescriptions a month, 16 staff provide

free health check MOTs and blood pressure, diabetes and pregnancy tests.

There are two pharmacists, five technicians trained to NVQ level three and five to NVQ level two, plus three staff who have been trained to carry out the tests, said Daud Hafiz. "We have had no problems getting staff as some of the technicians have young

families and are happy to work from five to 11pm. We pay for a taxi home when they stay late," he added.

There are CCTV cameras with the pharmacy hooked up to a security centre, and all staff carry panic alarms. "It has been built to look more like a doctor's waiting room than a shop," said Mr Hafiz. **JE**

## News in brief

### Smartcard worries

Pharmacists could miss out on IT funding if there is delay in issuing the smartcards they need to connect to the network, PSNC has warned.

There is a risk contractors could face increased ongoing costs for connectivity and maintenance of release one-compliant ETP systems, but be unable to claim ongoing ETP allowances because they cannot get a smartcard from their PCT.

According to Connecting for Health, 3,747 pharmacists have registered for smartcards as of April 24.

### Petitions increase



C+D has delivered more petitions in support of its Choice in Oxygen campaign to the Department of Health, bringing the total to more than 4,700 signatures. Thanks again to all those pharmacies that have submitted completed forms.

### NCSO endorsements

The Department of Health and the National Assembly for Wales have agreed to allow NCSO (no cheaper stock obtainable) endorsements for the following items for May prescriptions: diamorphine 5mg, 100mg and 500mg injection ampoules, and ketoprofen 100mg capsules.

### Compulsory savings

Compulsory dispensing of the cheapest generics would save the NHS £10.3 million, health minister Jane Kennedy has said in Parliament.

She based her information on the prices of the top 40 proprietary drugs between October and December 2005, for which a generic drug was both available and suitable for substitution.



# PSNI appoints director and seeks registrar

**PSNI** Raymond Blaney takes on strategic management in new role

The **Pharmaceutical Society of Northern Ireland** has filled one senior post and is recruiting for a second.

Raymond Blaney will become the new director on May 22, joining from Telewest and a career in telecommunications regulations.

Mr Blaney's role will include the strategic management of PSNI as it follows a modernisation programme, and representing the Society at a national level.

The registrar position will be advertised next week, with interviews taking place in June, according to PSNI president Brendan Kerr.

Commenting on other developments at PSNI, Mr Kerr said draft community pharmacy standards had been drawn up and discussed at last month's Council meeting. These would now be piloted in pharmacies to see how usable they were, before a further meeting with the Pharmaceutical Contractors'



Brendan Kerr: standards drawn up

Committee to discuss their potential implementation, he said.

The DHSSPS has indicated that 20 per cent of pharmacy inspections in Northern Ireland will in future be pre-announced in a letter to individual

pharmacies from the province's health department. By pre-announcing some inspections, pharmacies will have the opportunity to address issues such as factsheets, error logs, training of support staff, indemnity insurance, stock management and controlled drugs, which may all come under the remit of an inspection.

The health department is also to produce a quarterly newsletter to detail issues of interest to pharmacies in Northern Ireland. PSNI has plans to make the pharmacy register of Northern Ireland available online this year. No home addresses will be included, just name, registration number, date of registration and possible locality, suggested Mr Kerr.

PSNI will also increase personal retention and registration fees by 20 per cent on June 1 following a three-month consultation that ended in March. **JE**

For more news on Northern Ireland, see page 8

## Prescribing will 'transform' pharmacy

**Practice** Chief pharmacist hails 'real opportunity'

**Independent prescribing** by pharmacists will transform the public's perception of the profession, England's chief pharmacist has said.

It signified the "dawn of a new era" and presented a "real opportunity for doctors, nurses and pharmacists to use their clinical skills together", Dr Keith Ridge said.

The changes mean, from May 1, qualified pharmacists can prescribe any licensed medicine for any condition within their competence.

To date more than 550 pharmacists have qualified as supplementary prescribers, according to the Department of Health. The first pharmacist independent prescribers are expected to qualify towards the end of 2006. **GP**

## Alliance seeks backing for Boots deal

**Retailing** AU chairman issues rallying call to shareholders

**Alliance UniChem (AU)** has called for shareholder support for its proposed £7 billion merger with Boots this summer at the company's annual general meeting.

AU chairman, Paolo Scaroni, rallied shareholders, who could vote on the £7 billion proposal later this year.

"The proposed merger with Boots

presents us with a very exciting future. The combination of the two groups will provide a unique opportunity to combine complimentary strengths to create an international force in pharmacy," he said.

The tie-up is currently being challenged by Lloydspharmacy's

owner Celesio after receiving preliminary backing from the Office of Fair Trading this February.

AU had delivered a "strong" start to 2006 in its retail and wholesale divisions, Mr Scaroni told shareholders. The company added a net 17 pharmacies to its portfolio during the first quarter of this year. **MG**

## News in brief

### Key to Lift

Networking is king when it comes to booking your pharmacy's spot in an NHS local improvement finance trust (Lift) centre, according to UniChem.

Primary care trusts (PCTs) will favour pharmacists demonstrating good relations with GPs, MPs and customers when choosing who fills one-stop primary care centres, advised Jeremy Main, UniChem sales director.

"PCTs' choice will depend on local relationships. It's very important you engage. Local contractors will also have to demonstrate and persuade benefits to patients of collaborative working with GPs," he told delegates at the recent Avicenna conference in Goa.

### Win £500

Thank you to all readers who have already completed C+D's internet survey and entered the £500 prize draw. If you haven't entered yet, there's still time before the May 15 deadline. The survey was in the April 22 issue or download it from [www.dotpharmacy.com](http://www.dotpharmacy.com)

## Counter assistant skill boost

**Training** Numark targets concerns over OTC sales

**Numark** has unveiled plans for a major training initiative to boost skill levels among counter assistants.

The independent chain is holding 10 regional committee meetings across the UK, beginning on May 17. The sessions will provide specific training for counter assistants and will be held in tandem with MUR training for pharmacists.

Topics for the training sessions were established at meetings of Numark's counter assistant committees in Belfast, Manchester and Derby. Further groups will meet

in Barnsley, London and Scotland.

Emma Charlesworth, category development manager for Numark, said the committees were a response to research which found that counter assistants had concerns because the new contract led to an increase in responsibility for OTC business.

"Pharmacists are going to be spending a lot of their time on the professional side. They don't have much time on the OTC business where counter assistants play an increasingly important role," she said. **TH**



Emma Charlesworth: important role for counter assistants



# bazuka is making a big splash



Salicylic acid, lactic acid

bazuka™ that verruca

The undisputed No.1\* seller is on TV  
with an action-packed campaign

- ◎ For a **painless** answer to warts and verrucas
- ◎ No need for plasters

**NOTHING YOU CAN SELL IS MORE EFFECTIVE**

BAZUKA Trademark and Product Licences held by Diomed Developments Ltd, Hitchin, Herts, SG4 7QR, UK. Distributed by DDD Ltd, 94 Rickmansworth Road, Watford, Herts, WD1 7JJ, UK.

**Indications:** For the treatment of verrucas, warts, corns and calluses. **Directions for use:** For adults, the elderly and children: Once daily apply one or two drops of the gel to the lesion and allow to dry, taking care to avoid the normal surrounding skin. The following day, carefully remove the dried patch and apply fresh gel. Once every week, before re-applying fresh gel, gently rub the treated surface using the emery board provided. Continue treatment until the condition has resolved. This may take up to 12 weeks for certain verrucas and warts. **Contra-indications:** Not to be used on the face, neck, intertriginous or anogenital regions, or by diabetics or individuals with poor blood circulation. **Precautions and Warnings:** Keep away from the eyes, mucous membranes and from cuts and grazes. Avoid spreading onto normal surrounding skin. Do not use excessively. Avoid inhaling vapour and keep cap firmly closed when not in use. Avoid contact with clothing, fabrics, shoes and other materials, as it may cause damage. **Side-effects:** Some mild, transient irritation may occur, but in cases of more severe irritation or inflammation, treatment should be discontinued.

Bazuka Gel and Bazuka Extra Strength Gel are highly flammable – Keep away from flames. Store at room temperature, not exceeding 25°C. Keep all medicines out of the reach of children.

**FOR EXTERNAL USE ONLY. Legal Category:** [P] **Packs:** Bazuka Gel (PL0173/0161) – 5g RSP £4.95 (£4.21 exc. VAT). Bazuka Extra Strength Gel (PL0173/0154) – 5g RSP £5.95 (£4.21 exc. VAT).

\*Source: IRI Infoscant, all outlets, Oct '05 MAT unit market share.



# Pharmacists top health poll

**Northern Ireland** Public give pharmacy services a 99 per cent satisfaction rating

Asha Fowells

**Pharmacists** have beaten GPs and dentists to the top spot in a health satisfaction survey conducted in Northern Ireland.

Some 99 per cent of respondents said they were satisfied with pharmacy services, compared to an overall rating of 78 per cent for health and social services in NI.

Commissioned each year by the Department of Health, Social Services and Public Safety, the survey asked over 1,500 random adults in the province for their opinion on primary and secondary health and social services.

Eighty per cent of those polled had used a pharmacy in the previous year, making it the most commonly used health service. Within this

figure, less than 1 per cent of respondents felt the information they received was not helpful, or that the service was inconvenient. Despite this, 13 per cent called for pharmacies to be more accessible, for example with different opening hours, nearly 10 per cent wanted shorter waits, and 8 per cent said more pharmacy staff were needed.

Brendan Kerr, president of the

Pharmaceutical Society of Northern Ireland, said the profession could take "great pride" in its high score. "It reflects the tremendous level of service and the very high standards available in community pharmacies," he added.

**For more information:**  
[www.tinyurl.com/ox8gg](http://www.tinyurl.com/ox8gg)

## Software identifies patients who could benefit from MURs

**Practice** Computer can also book MUR candidates

A **pharmacy** IT supplier has launched software that can identify patients that may need a medicines use review.

In addition, the software from Systems Solutions' can be used to schedule an appointment for an MUR for any patient it identifies.

The software uses a range of factors to identify suitable candidates including the type or quantity of medication that particular patients are taking, their medical conditions, and their age.

David Raethorne, Systems

Solutions' technical director, said: "With our new MUR and appointments scheduling software, the pharmacist doesn't have to wait until the patient walks into their pharmacy; they can proactively identify suitable patients, contact them and sign them up for an MUR consultation during the pharmacy's quieter times."

He said the software could help reduce missed MUR appointments as it could be set up to remind pharmacy staff to contact patients prior to the MUR. **GP**

### News in brief

#### Update MCQ

This week's issue contains the questionnaire for the following Pharmacy Update modules carried in April: lipids (1365), scabies and threadworm (1366) and psoriasis (1367).

Pharmacy Update is a distance learning programme accredited by the College of Pharmacy Practice, with MCQs and a telephone marking service supported by Genus Pharmaceuticals. Previous modules are available at [www.dotpharmacy.com](http://www.dotpharmacy.com)

Phone Pauline Sanderson on 01732 377269 for more details.

#### Midcounties refit

The Midcounties Co-operative Pharmacy group has invested nearly £500,000 in an 18-month, 16 branch refurbishment initiative. The branches all now carry the Co-operative Pharmacy branding.

## Alliance heads £5m health centre

### Retailing One-stop centre

**Alliance Pharmacy** has opened a branch as part of a £5 million NHS Lift centre in Birmingham.

The branch forms part of the Chelmsley Wood Primary Care Centre near Solihull.

The pharmacy plans to provide patient intervention services, needle exchange and addict support, Alliance Pharmacy revealed.

Alison Byworth, a pharmacist at the Alliance Pharmacy site, said: "It really is wonderful to have so many healthcare professionals working together under one roof to provide the very best in healthcare to the local community. Myself and the team all feel extremely lucky."

The Lift centre also includes a GP surgery, dental practice and 'healthy eating' cafeteria for staff and patients, according to Alliance Pharmacy. **MG**



Kevin Harmer (right), general manager of UniChem's distribution centre in Chessington, explains to Edward Davey, MP for Kingston and Surbiton, how UniChem and other pharmaceutical wholesalers ensure the security of the medicines supply chain and stamp out counterfeiting. UniChem has arranged a series of MP visits to highlight the role of wholesalers

## North East plans single minor ailments scheme

**Practice** Six PCT schemes to become one

**Northumberland, Tyne & Wear** Strategic Health Authority aims to establish a single minor ailments scheme across the whole North East.

Ian Spencer, director of clinical governance at the SHA, said he had been working with primary care organisations to review the local development of community pharmacy minor ailments schemes, which have been developing across the region since 2000.

Although there are schemes in all six PCTs and they now have about 350,000 of the local population covered, they are all different in the conditions they cover, payment schedules and

communication with patients.

"There would be benefit in agreeing a single model so that we can build on local experience, incorporating elements that have been shown to work," explained Mr Spencer. "If we get a standard approach, it will have a bigger punch when we go with it. It will also save replication of schemes and help divert patients away from GP surgeries and into pharmacies."

Mr Spencer hopes existing schemes will migrate to the new model when it has been formulated. A planning meeting to discuss the integrated scheme is scheduled for the end of May. **JE**



# We're expecting our sales to hit new heights this summer



- ✓ Targeted multimedia campaign
- ✓ Zirtek is the number one tablet brand in pharmacy through the key hayfever season\*
- ✓ Highly visible pack design
- ✓ Impactful in store support

**Zirtek®**  
ALLERGY RELIEF  
cetirizine hydrochloride

[www.zirtek.co.uk](http://www.zirtek.co.uk)



Ref: \* IRI Consumer retail sales data 2005 - shows Zirtek is the  
brand chemist weekly treatment

© 2005



# Zero discount changes cost neutral, says PSNC

## Pharmacists targeted in ethics drive

### Industry Companies warned to be vigilant

**Business consultancy** firm KPMG has called for pharmaceutical companies to weed out unscrupulous salespeople in order to enhance the industry's ethical reputation.

Hitesh Patel, head of pharmaceutical forensic services at KPMG, said stricter expenditure controls, IT tools to identify suspicious transactions and formal whistle-blowing processes were necessary to combat the problem.

"Once culprits have been identified, the employer must deal with them strictly and promptly, he said." His comments follow a drug industry event on April 25, promoting ethical guidelines and highlighting the procedure for processing complaints. Richard Ley of the ABPI, which co-ordinated the event, said 48 per cent of doctors admitted having no knowledge of the code but he thought a higher number of pharmacists were unaware, adding: "We are keen to spread the message to ensure healthcare professionals, including pharmacists, are aware."

David Pruce, director of practice and quality improvement at the RPSGB, said pharmacists will not be given any specific guidance on dealing with influences on prescribing, such as sales representatives. He added that it is part of the RPSGB accredited prescribing training course. **TH**

### News in brief

#### NPA animal pack

The NPA has updated its animal medicines resource pack to include background, information and resources, guidance and support on the market. It also reflects changes to veterinary legislation.

#### Free group skills training

Northern Ireland pharmacists can take advantage of free training on group work skills, including talking to groups about health issues and making group talks more interactive. The training dates are May 24 and June 1. For more information, contact Building the Community Pharmacy Partnership on 028 302 64606.

### Contract Warning for contractors dispensing high volumes of ZD drugs

Asha Fowells

#### Pharmaceutical Services

Negotiating Committee has described changes to the zero discount scheme as "cost neutral".

However, the organisation has warned that contractors who are dispensing high volumes of zero-discounted drugs may be adversely affected if the products do not fall within the new ZD criteria (see panel). Manufacturers must amend their discount terms to prevent this happening, advised PSNC.

PSNC singled out GlaxoSmithKline, which last year significantly cut the prices and discounts applied to some of its branded prescription products (C+D, April 2, 2005, p4). But a GSK spokesman said that although the company had examined the DH's plans "we will not be adjusting our discounts".

**For more information:**  
[www.tinyurl.com/l66er](http://www.tinyurl.com/l66er)

Following last year's consultation on simplifying reimbursement arrangements for NHS dispensing contractors, the Department of Health is implementing changes to the zero discount scheme in two phases.

• **Stage 1** (effective May 1, 2006): A product will now only be added to the ZD lists if requested by PSNC, and if it is a Schedule two or three controlled drug, a hazardous, cytotoxic or cytostatic drug, or requires refrigeration.

In addition, products will be allowed onto the list if the manufacturer, and AAH and UniChem, do not offer a discount, and fewer than 500,000 items a year are dispensed, and the average net ingredient cost per item is more than £50. All products on both ZD lists as of April 30 will remain for the time being.

• **Stage 2** (likely to be implemented this September): All products not

meeting the new criteria will be removed from the lists, which will be merged. Discounts will be removed from products no longer on the list, but a downward adjustment will be made to the discount deduction scale to reflect the change.

The DH says that, on average, the plans will be cost neutral to both the NHS and contractors. Once the second phase is complete, contractors will only need to endorse products obtained from specials manufacturers with no discount as DNG (discount not given).

The DH says that the changes to the ZD scheme are one of many proposals aimed at simplifying reimbursement processes and increasing transparency.

Other proposals described in the original consultation will be implemented "in due course", the DH added.

## 65,000 sign up to Boots health club

### Multiples Individual health information on offer

**More than 65,000** consumers have signed up to a Boots initiative that aims to provide personalised health information.

The Boots Health Club offers information in eight health areas, such as weight loss, smoking cessation, children's and women's health, and allergies.

The scheme also gives a 10 per cent discount for all customers aged over 60 across the Boots branded range, as well as offering a free eye test to every member.

A panel of healthcare professionals and community pharmacists has also been recruited to provide the health advice as part of the service. Boots hopes it will provide support to two million people by 2007. **GP**

**For more information:**  
[www.tinyurl.com/l66er](http://www.tinyurl.com/l66er)



Allison Coll with Gerald Alexander, one of the judges

## Allison Coll is top student

### Industry Winner heads to Australia for convention

**Pharmacy student** Allison Coll scooped an invitation to the International Pharmacy Students' Convention in Cairns, Australia, after being named Reckitt Benckiser Pharmacy Student of the Year 2006.

Ms Coll beat five other finalists shortlisted from 417 entrants to take

the award. It was judged by a panel comprising Gerald Alexander, vice-president of RPSGB (pictured), Sukhjot Grewal, member liaison officer of the NPA, Mel Smith of Reckitt Benckiser and last year's winner Nisha Thakrar, who is also vice-president of the BPSA. **TH**



# VERRUCA?



## FREEZE IT

with NEW Scholl Freeze Verruca & Wart Remover

There's no more effective way to remove verrucas and warts

- Quick, safe and easy to use
- Clinically proven to be as effective as liquid nitrogen treatment by professionals
- Suitable for use on children aged 11 and over
- Can remove verrucas and warts with no pain or treatment



SSL International, Venus, 1 Old Park Lane, Trafford Park, Manchester M41 7HA, UK

Scholl and the Scholl logo are registered trademarks of the SSL group.

Promotional offers and transfer orders online @Comedis.com

[www.scholl-footcare.com](http://www.scholl-footcare.com)





# MURs up despite mixed reactions

A year on, pharmacists share their views on the highs and lows of medicines use reviews

Max Gosney

**One year into the new contract** and the jury on the medicines use review appears to be out. For some, the advanced service has symbolised the pharmacist's successful switch from drugs dispenser to health advisor.

Yet critics argue that the service has been blighted by cumbersome form-filling and a lack of co-ordination with GPs, which have contributed to most contractors missing the Department of Health's (DH) 250 quota for MURs within the first year of the contract.

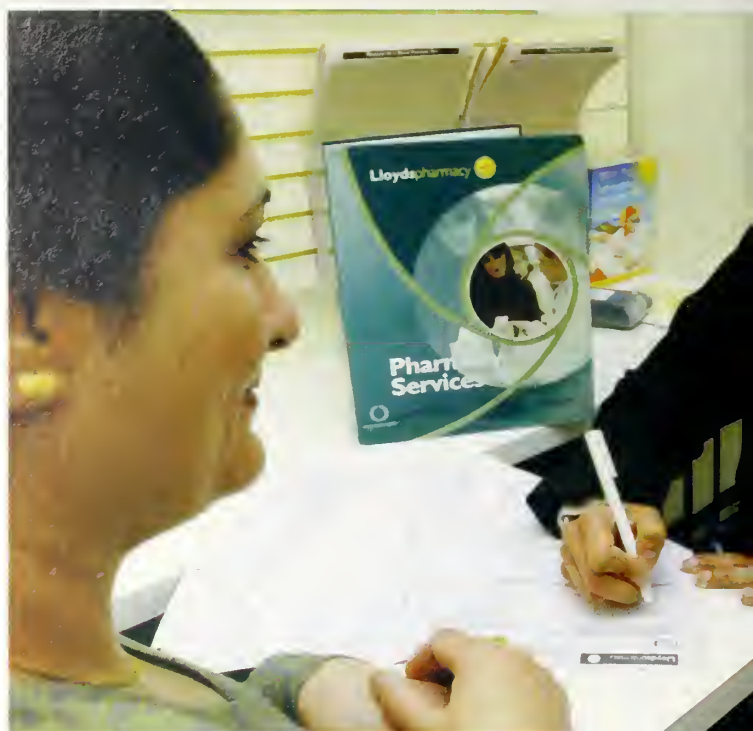
It is difficult to determine quite how many MURs have been carried out. The last widely publicised figure was 72,000 but that was an estimate for the end of January. Even so, it had shown how MUR uptake had taken off, as in December the figure was estimated at 30,000.

A written answer given by the health minister Jane Kennedy at the end of January tabulated the number of MURs that had been conducted as follows (as at 2005):

|           |        |
|-----------|--------|
| April     | 373    |
| May       | 718    |
| June      | 870    |
| July      | 1,688  |
| August    | 2,241  |
| September | 5,037  |
| October   | 8,696  |
| November  | 13,646 |

It can be assumed that the figure would continue to grow exponentially as more pharmacy contractors started to offer MURs, and is likely to have increased significantly since then, according to a DH spokesperson. At the start of March, both Tesco and Lloydspharmacy were estimating to have each carried out 40,000 MURs.

After early confusion, contractors



have quickly become confident with MURs, says director of clinical and commercial operations at Lloydspharmacy Iqbal Gill. "One of the biggest barriers to MURs is that it's a big cultural change," he says. "At first, some pharmacists were spending an hour doing a review which should take 10 to 20 minutes. We've been looking to free up

pharmacists' time and encourage them to pass duties to other support staff. It is not something we've been able to do overnight, but they're getting more confident."

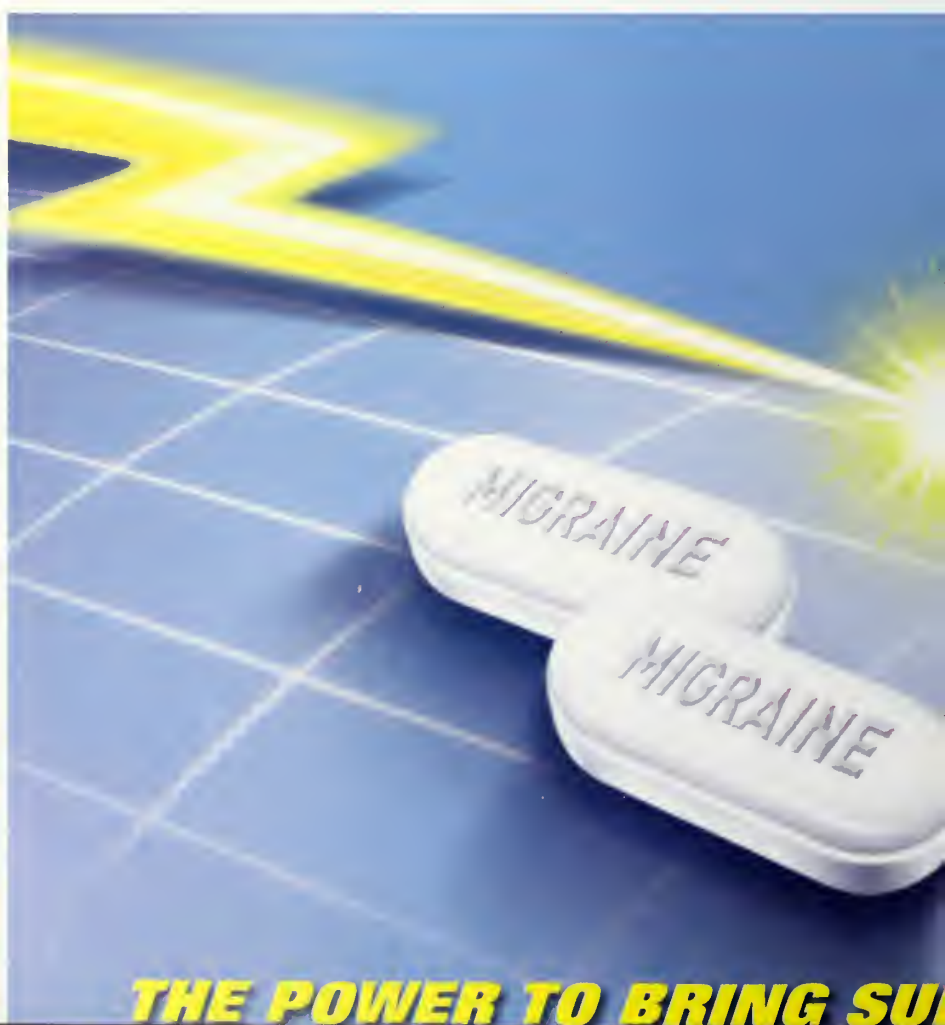
For many contractors it has been a liberating experience.

Val McFarlane, pharmacy assistant at Tesco Pharmacy in Aldershot, says: "We've got very involved with our

## Solpadeine Migraine Ibuprofen & Codeine Tablets Product

**Information. Presentation:** Ibuprofen 200 mg and Codeine Phosphate Hemihydrate 12.8 mg. **Uses:** Relief of mild to moderate pain in soft tissue injuries including sprains, strains and musculo-tendonitis, backache, non-serious arthritic and rheumatic conditions, neuralgia, migraine, headache, dental pain, and dysmenorrhoea.

**Dosage and administration:** *Adults:* One or two tablets every 4 to 6 hours. Not more than 6 tablets in 24 hours. Not to be taken for more than 3 days without medical advice. *Children (under 12):* Not recommended. **Contraindications:** Hypersensitivity to ingredients, history of peptic ulceration. **Precautions:** Gastrointestinal disease, asthma or allergic disease, NSAID sensitivity. **Interactions:** MAOIs, thiazide diuretics, anticoagulants. **Pregnancy/lactation:** Avoid unless essential. **Side effects:** Constipation, nausea, dizziness and drowsiness, gastrointestinal disturbance, peptic ulceration and gastrointestinal bleeding; thrombocytopenia; hypersensitivity reactions including non specific allergic reactions, anaphylaxis, bronchospasm, skin disorders, angioedema and bullous dermatoses. **Legal category:** P. **Product Licence number:** 00071/0431. **Product licence holder:** GlaxoSmithKline Consumer Healthcare, Brentford, TW20 9GJ, UK. **Package quantity and RSP:** 24 tablets £4.99. **Date of preparation:** February 2006







UniChem customer forums for Midlands and Wales.

"It's demonstrated that pharmacy is not about changing labels on boxes and dispensing medicines. We've proved that we can carry out professional services."

Contractors can look back with pride on their first 12 months of providing the advanced service, says John Nutthall, United Co-op general manager for healthcare. "It's been very positive for pharmacy and shows the DH it can have confidence in us. We can't just supply medicines but must add value to the service."

But proficiency in MURs has come at a cost, says Murad Ali, who runs the Bassaleg pharmacy in Gwent. "We are a small pharmacy so do not have the space for a consultation area. It's great for the big boys but I lose out straight away," he says.

Pharmacists giving advice to patients on medicines is nothing new, adds Mr Ali. "The MUR is a fancy name for a service I have offered my customers since I became a pharmacist. The whole contract seems to be taking our money away with one hand and not giving it back with the other."

The MUR is unfeasible for many small independents, agrees Bharat Patel, of the Brigstock pharmacy in Croydon. "If I want to do MURs then I

have to hire a locum to oversee the dispensary while I am in the consulting room. The service is paid at £23 but if I only manage two an hour then it barely covers the locum's fees. Just filling out the form takes 10 minutes and you can't just kick a patient out if they want to carry on talking past the recommended time. It's unworkable." Mr Patel has instead found a more profitable use for his

GPs, adds Mr Esmail. "Make an appointment with your local doctors to discuss the contract. I did and they were very interested. Nobody has explained what an MUR is to many GPs so it is not surprising that forms are filed and forgotten."

Teamwork is key if pharmacists are to thrive under future GP-led commissioning, says Mr Esmail. "What's the point of GPs doing

If I want to do MURs I have to hire a locum to oversee the dispensary while I am in the consulting room

consultation area. "I use it to take people's passport photos. It seems to pay more than doing MURs."

However, others remain optimistic about clinical-based services. "I think the MUR is vital," says Riaz Esmail, of Fairview Pharmacy, Edgware, Middlesex. "Some may say it's only £23, but if you use it imaginatively there's no reason why you can't build patient trust and encourage them to use your other services."

MUR success will also depend on developing a close relationship with

medicine reviews and pharmacists doing MURs? There's no co-ordination. With practice-based commissioning you could offer patients a choice of MURs at the surgery or pharmacy."

• What are your views on MURs? If you want to share your experiences with other C+D readers, write to us at C+D, Sovereign House, Sovereign Way, Tonbridge, Kent TN9 1RW, email [chemdrug@cmpinformaton.com](mailto:chemdrug@cmpinformaton.com), or fax to 01732 367065.

customers. Most have known us for years so it makes it easier to approach them when offering an MUR. They like it because we are taking an interest in them and patients will talk to you all day."

Pharmacists' success in adopting the MUR has helped boost the profession's profile within the NHS, suggests Bharat Patel, chairman of

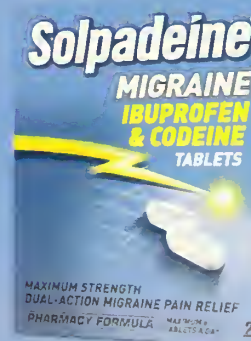
# Solpadeine®

brings you an answer to migraine

No other analgesic is more effective against the pain of migraine without prescription than the maximum strength combination of Solpadeine Migraine Ibuprofen & Codeine Tablets.

Providing migraine sufferers with fast, effective pain relief from as early as 15 minutes.

Recommend Solpadeine Migraine Ibuprofen & Codeine Tablets – a brand you can trust.



Ibuprofen, Codeine

FERERS BACK FROM THE PAIN OF A MIGRAINE



# RDG EVENTS

Email upcoming events to [chemdrug@cmpi.biz](mailto:chemdrug@cmpi.biz)

## May 9

### Barnet Branch RPSGB

Speaker: Gerald Zeidman

Venue: The Education & Information Centre, Barnet Hospital, Wellhouse Lane, Barnet ENS 3DJ  
Hot buffet available from 7.15pm, meeting at 8pm

### RDG Wales & West educational event

Speaker: Ingrid Vervier (Dow Corning)

Speakers: Professor Simon Biggs and Dr Simon Lawson  
15.00-17.00hrs with free buffet after the event

Venue: Bristol Golf Club, Almondsbury, South Glos

### Dudley & Stourbridge Branch RPSGB

Meeting cancelled

### Bradford Branch RPSGB

Meeting cancelled

Speaker: Dr Christine Clark  
Venue: Bankfield (Ramada Jarvis) Hotel, Bingley  
Buffet at 7.30pm for 8pm start

### Coventry & Warwickshire Branch RPSGB

Meeting cancelled

## May 10

### British Society for the History of Pharmacy

Joint meeting: Foundation lecture

Speaker: Dr Ann Ferguson  
Venue: RPSGB's headquarters, 1 Lambeth High St, London  
Refreshments served from 5.30pm  
Non-members are welcome to attend

## May 11

### Weald of Kent Branch RPSGB

Meeting: Independent prescribing by pharmacists

Venue: Ramada Jarvis Hotel, Pembury TN2 4QL  
Buffet from 7.30pm. Speaker 8.15pm

## May 12

### The Pharmacy Practice Research Trust

The practice research awards seminar

Venue: Natural History Museum, Flett Theatre, Exhibition Road entrance, London SW7 5BD

## May 16

### Dudley & Stourbridge Branch RPSGB

Meeting: Regulation consultations, CPD Pharmacy 2020

Venue: Clinical Education Centre, 1st floor, Block C, Russells Hall Hospital, Dudley at 8pm  
Further information from Branch Secretary Judith Hesslewood 0121 602 1193. [Judith@srh.demon.uk](mailto:Judith@srh.demon.uk)

Xrayser and the rest of the opinion pages p16-17

Read Damien Hirst's views on pharmacy p30-31

What's new over the counter? p26-28

# PSORIassist

Get well informed  
Get well prepared  
Get well controlled

## NEW PSORIASIS AWARENESS PROGRAMME LAUNCHES MAY 18<sup>TH</sup>

Psoriassist is a new national programme with a twofold purpose: education and empowerment. The programme aims to raise general awareness about psoriasis and its impact on quality of life. Importantly, the programme will also encourage people with psoriasis to seek help for taking control of flare-ups.

### 7 out of 10 suffering in silence?

Nearly 1.2 million people in the UK have psoriasis, but only about 25% seek help for flare-ups. Reasons identified by key opinion leaders include public perception of the disease as minor, misconceptions

about treatment options, reluctance to approach healthcare professionals and a general feeling of helplessness.

The Psoriassist programme developed by LEO Pharma directly addresses these concerns to help people with psoriasis feel that it is worthwhile to consult healthcare professionals about their condition.

### Getting well informed, well prepared and well controlled

As of 18th May 2006, Psoriassist ads will appear in major national press titles. The ads will prompt readers to call a freephone number or visit [www.psoriassist.co.uk](http://www.psoriassist.co.uk) for a free booklet. The Psoriassist booklet

includes more details about the disease, treatment and support overviews, advice for talking to healthcare professionals and more. The Psoriassist website will initially serve as a distribution point for the booklet plus provide basic information about psoriasis and links to related sites.

### Your support is key

Supported by key professional and patient groups, the Psoriassist programme will hopefully generate action as well as awareness. Please join us in encouraging people with psoriasis to learn more about how they can take control of their condition and improve their quality of life.

Developed and sponsored by



The Psoriasis Association



Psoriasis Scotland  
Arthritis Link Volunteers

1008 10198 April 2006



## Editor

Charles Gladwin, MRPharmS

## News Editor

Gary Paragpuri, MRPharmS

## Clinical Editor

Asha Fowells, MRPharmS

## Business Editor

Max Gosney

## Marketing Editor

Lesley Ribbens

## Contributing Editor

Adrienne de Mont, FRPharmS

## Production Editor

Fay Jones, BA

## Group Art Editor

Richard Coombs

## Editorial Production Assistant

Bethany Straker

## Editorial Secretary

Jan Powis

Editorial (tel): 01732 377487

(fax): 01732 367065

chemdrug@cmpi.biz

## Price List

Colin Simpson (Controller)

Darren Larkin (Data Manager)

Maria Locke (Senior Clerk)

Price List (tel): 01732 377407

(fax): 01732 377559

## Senior Sales Manager

Mark Walley

## Sales Managers

Daniel Spruytenburg,

Deborah Heard

## Classified Executive

Amy Turner (tel): 020 7921 824

## Advertisement Secretary

Elaine Steele

Advertising (tel): 01732 377621

(fax): 01732 377179

## Projects and Price Service Manager

Patrick Grice, MRPharmS

## Pharmacy Projects Administrator

Pauline Sanderson

01732 377269

## Production

Katrina Avery

## Marketing Manager, Healthcare

Lisa Taylor

## Commercial Director, Healthcare

Mary McGregor

## Publishing Director

Phil Callow

© CMP Information Ltd Chemist & Druggist incorporating Retail Chemist, Pharmacy Update and Beauty Counter

Published Saturdays by CMP Information Ltd, Sovereign Way, Tonbridge, Kent TN9 1RW

C&D on the internet at:

<http://www.dotpharmacy.com/>

Subscriptions: (Home) £173 per annum; (Overseas & Eire) \$412 per annum. Single copies C&D £3.50 (postage extra). Extra Price List for subscribers: £16 per single copy; for non-subscribers: £55 per single copy.

Subscription plus additional Price List: UK £173 plus £120; overseas: \$412 plus \$205.

Circulation and subscription: CMP Information Ltd, Tower House, Sovereign Park, Lathkill St, Market Harborough, Leics. LE16 9EF. Telephone: 01858 468811 Fax: 01858 434958

Refunds on cancelled subscriptions will only be provided at the publisher's discretion, unless specifically guaranteed within the terms of subscription offer.

The editorial photos used are courtesy of the suppliers whose products they feature.

We are not responsible for the content of any external websites referred to in this magazine.

# confused? isolated? frustrated?

## IT and supermarkets top pharmacy concern

Pharmacy worries:  
IT and the growth of supermarket pharmacies are some of the top concerns of independent pharmacists.

explained how trade had not been particularly buoyant over Christmas. There is a feeling that more customers are buying medicines over the internet, from

## Multiples increase share by 50pc in past decade

The number of independent pharmacies in the UK has fallen by 10.4% since 1994, while multiples have increased by 50%.

## TALKING POINT

The independent sector is being damaged by the mistaken belief that its interests are the same as those of the multi-national companies. What some independents want is a separate organisation to represent their interests. Step forward the Independent Pharmacy Federation

## Give pharmacists the tools for the job

The sum of the Medicines and Healthcare products Regulatory Agency is to give the public the best possible service.

## Independent pharmacies threatened, say NIPF

## Reform will benefit pharmacy, says Hewitt

# ...help is at hand

We are the largest independent commercial organisation solely looking after the interests of independent pharmacists. Our members benefit from our practical help especially with our Professional Services programme, commercial know-how and political influence.

The growth of multiples in pharmacy is cause for concern but because you are local, independent and an established part of your community, you can fight back. To maintain your influence in your locality you need support - support in professional services, advantageous trading terms and help in many other areas of your business. Find out how you can join the Nucare club by contacting:

Michael Rust on **01908 423 546**  
to find out how we can help and how easy it is to join and enjoy the benefits.



RUN BY PHARMACISTS FOR PHARMACISTS

Newsdesk  
01732 377688

Products  
01732 377600

Features  
01732 377487

Clinical  
01732 377463





## Comment from the editor

### Using the pharmacy community



Before Christmas, we invited your views on the magazine, and we followed this up with further reader research. We hope that this redesign – the first major design change since September 2001 – will help you to be even more successful in the world of community pharmacy.

Our reader research told us that you like the content C+D provides as a magazine. You want the latest news, but you told us you also like the variety of subjects we cover – to be stimulated and be entertained.

But when there is so much else going on in your busy working lives, you want to be able to access information as easily as you can. Within the remit of a magazine, we hope that the new design and layout helps you even more in that respect.

Our front cover this week flags up an interview with Damien Hirst, the Turner Prize winning artist who has a certain affinity with pharmacy. He provides an alternative perspective, as an onlooker and patient. Future covers will feature you, the reader, as we aim to share your views on pharmacy and showcase best practice and innovation.

Pharmacy's stature – both in the eyes of other health professions and the public you serve – has been growing in recent years. We are now on the threshold of further advances as pharmacists acquire prescribing rights and take on a much more significant role in the long-term health and wellbeing of the public.

To do this, pharmacy needs to work more closely and share its views and experiences. C+D wants to be a part of that and we hope that you will continue to help shape the content of this magazine by letting us know what you like, what you don't like and what you want to see more of.

In the weeks ahead we will profile our front cover Pharmacy Champions, provide you with more clinical and educational articles and also tell you about what your colleagues are doing. We hope to inspire you and provoke you, but we also want to help build that sense of 'community' in community pharmacy.

We hope you enjoy the new look of the magazine, as well as find it as valuable as ever. We look forward to hearing from you.

We hope that you will continue to shape the content of this magazine

**How often do you step back to reflect on what you are doing, where you are going and what you want to achieve?**

In this world of constant change the opportunity to do so can often be overlooked, or put on the back-burner while more immediate concerns are attended to. But it is important to take stock of where you are and where you want to be, to make sure you have a firm footing if you want to make progress, rather than to lose your way through not having a clear perspective.

For the past few months we have been looking at how C+D can better respond to and reflect the needs of our readers.

## Your views

### Are we using the NHS wisely?

**PAGB Perspective: executive director Sheila Kelly weighs up the true cost of a visit to the doctor**



**"£18 for a visit to the doctor? That sounds cheap to me"** has been the general attitude of my friends as I tell them about the costs of the NHS. What is interesting is what they say next: "That's two hours for my cleaner" and "if I offered to pay £50

could I get half an hour instead of 10 minutes?" Of course they are largely middle class professionals, but it's clear that at that cost they wouldn't feel guilty about using their doctor's precious time. I got the same reaction when I tried it out on a taxi driver and from my neighbour, who is a self-employed tradesman.

These were salutary lessons as I was practising my usual lobby message to encourage people to self-medicate and go to the pharmacist instead and I thought I had found a new approach. If the money angle doesn't work then the time argument will work even less. The reality is that most people in reasonable health prefer not to go to the doctor more than necessary and don't go very often.

When doctors complain that 40 per cent of people in their surgeries don't need to be there, they ignore the fact that the group consulting

about minor ailments by and large isn't the same every time. Of course people in poor health and over 65 are more likely to attend the surgery, but last year's PAGB consumer survey showed that 68 per cent of people in the UK go to the doctor fewer than three times a year. Half an hour a year, costing the NHS less than £60, is a fraction of what they pay in taxes. Would knowing the costs encourage more people to go to the doctor, no longer feeling guilty about using up his or her time?

No wonder it's been a challenge to find a message that changes behaviour. And no wonder GPs find it difficult to make time to talk to people about self-care. Those three visits a year might well be for three different illnesses or sets of symptoms, so of course it is easier to prescribe something instead of trying to do a teach-in about managing the symptoms with a self-medication

product. And the answer to the GP's problem isn't to push it on to the pharmacist. Prescription volumes went up again last year and, with dispensing fees at £1.66 a time, what pharmacist has the time or the incentive to fill the educational gap?

This whole line of thought was triggered by a comment made to me by an NHS policy official, who suggested that if people knew how much it cost to visit the doctor or have a drug dispensed they would think twice before going to the NHS. The problem is that the NHS doesn't have any data about what symptoms people are taking to the doctor or how frequently any individual patient visits.

I doubt if the new electronic system will improve that information but until it's available we have no basis for making policy and my straw poll suggests we need to develop policy carefully.



# Xrayser

Xrayser

CD

## More haste, less speed

**Things are changing so fast at the moment it's difficult for me to keep up.**

But it also seems that a lot of the organisations involved with pharmacy are struggling to keep up with government timetables and with each other.

I received a private prescription for a controlled drug this week which had not been written on a new-style FP10PCD form. Apparently this is perfectly acceptable if the prescriber has simply not received any of the new forms, as long as I confirm this with him. So much for tough CD regulations – they only apply if the PCT can keep up with its admin.

The NPA Supplement advised me that I must apply to be on my PCT's fitness to practice register by June 30 or I couldn't work after then. But the latest PSNC News advises me not to do this just yet because I'd probably have to resubmit all the paperwork if I did. Apparently the delay here is because the government has not had time to submit the necessary regulations in line with its own timetable.

Many of us have invested in the necessary IT improvements for ETP yet, due to an overambitious timetable, we have neither a compliant software system nor a smartcard that will enable us to get going, never mind start claiming our rightful funding. The main problem with the oxygen change was that it was expected to happen at the flick of a switch – one day pharmacy supply, the next day regional suppliers. That's unrealistic by anyone's standards.

CD



The Scots seem to have a much better idea about how to organise themselves (C&D, April 29, p4). Agreeing a two-year contract deal allows more long-term planning, saves time renegotiating every year, and gives them more time to decide what the next contract deal should contain.

While rapid progress is desirable, a dose of realism to the timetable would make everything go a little smoother, and probably faster, while avoiding unnecessary panic and confusion.

## A repeat recipe for disaster

**A local surgery has decided to** circumvent the well thought out and fully supported repeat dispensing arrangements and implement its own poorly considered model. The surgery's brainwave was to issue batches of six postdated prescriptions for patients on regular medication. This is an extremely inflexible system and if there are any medication changes the surgery will not issue a new prescription until it has received the old one back.

So, if medication is changed, patients are kept waiting while the old prescription is rushed back from here to the surgery. And if any tablets are 'lost', patients often go without because I can't issue their next prescription until its due date. Patients going on holiday cause all

sorts of problems, and ultimately make more work for the surgery.

This is typical of this practice, which will only ever do things its own way. The GPs are reluctant to take calls about prescription queries and are unhelpful when they do; they will not issue weekly prescriptions for MDS; and moves to collaborative working have been firmly rebuffed.

These people do not know the meaning of teamwork and they have increasing power over my future. They are unlikely to commission anything at all after practice-based commissioning takes off, they will be as difficult as possible over ETP, and they will never take any prescribing advice. I can only hope their huge salaries will allow them to retire early.

Northern  
Ireland  
Notebook

## Titanic reflections

**I remain unconvinced of the** need for a major change to our professional regulation. Yet the section 60 order that will change regulation of pharmacists in Great Britain and sets out a framework that will increase our regulatory workload without an attendant increase in public safety is out for consultation.

One proposal is that no fewer than six committees, each with its own remit to poke its nose into the daily activities of pharmacists, replace Statutory Committee. It cannot be helpful for pharmacy practice to be demeaned to a tick-box exercise. The changes will create a "don't get caught" culture rather than one in which a positive regard for the patient prevails.

It's highly likely that the content of any order to replace the Pharmacy Order 1976 in Northern Ireland will plagiarise the Pharmacy and Pharmacy Technicians Order 2006 in Westminster. In short, our regulatory framework will be exactly that of Great Britain. But how can PSNI, a professional body of 1,800 pharmacists, possibly support the maintenance of six disciplinary committees?

**It's highly likely that our regulatory framework will be exactly that of Great Britain**

It's plain that PSNI is very different to the RPSGB, whose Royal Charter articulates its professional leadership role, while the 2006 order has objects that refer solely to public interest and public protection.

PSNI has no royal charter, so changing PSNI's objects to public interest and protection would prevent it from promoting the profession of pharmacy. And if it could only regulate, why retain it?

The iceberg of reality has struck PSNI's bow and it is sinking fast. If Foster doesn't get it, logic and pragmatism will. All effort should be channelled into seeking what agreement we can with the RPSGB, including retaining as much of our national identity as possible.

**Written by a community pharmacist practising in Northern Ireland**

Xrayser

CD





E45

Dry and sensitive skin needs treatment that works hard to moisturise.

Over the years, the trust earned by E45 Cream to provide moisturising relief for a range of dermatological conditions has gathered sound clinical support. Studies show E45 Cream brings significant improvements in the dryness, redness and cracking of eczema<sup>1</sup> and the poor texture and scaliness of conditions like ichthyosis.<sup>2</sup>

## Soaked to the skin


White soft paraffin, light liquid paraffin and Medilan – a highly refined, hypoallergenic form of lanolin – work synergistically to replenish moisture and improve skin appearance.

As well as being efficacious, our dermatologically tested, unperfumed and well tolerated emollient was voted pleasant to use by 82% of patients.<sup>3</sup>

E45 Cream. Experience brings expertise

Dry skin & Eczema

**EXPERTE45E**



**E45 Cream:** E45 Cream is a white smooth emollient cream containing white soft paraffin 14.5% w/w, light liquid paraffin 12.6% w/w and hypoallergenic anhydrous lanolin 1.0% w/w.

**Uses:** For the symptomatic relief of dry skin conditions, where the use of an emollient is indicated, such as flaking,

chapped skin, ichthyosis, traumatic dermatitis, sunburn, the dry stage of eczema and certain dry cases of psoriasis.

**Dosage and administration:** Adults, children and elderly. Apply to the affected part two or three times daily. **Contra-indications:** E45 Cream should not be

used by patients who are sensitive to any of the ingredients.

**Undesirable effects:** Occasionally, hypersensitivity reactions, otherwise adverse effects are unlikely, but should they occur, may take the form of an allergic rash. Should this occur, use of the product should be discontinued.

Package quantities: 50g tube, 125g tub, 500g pump pack. MRRP: 50g £1.85, 125g £3.75, 500g £9.69. Legal category: GSL. Product licence number: PL 0327/5904

**Product licence holder:** Crookes Healthcare Ltd, Nottingham NG2 3AA.  
**Date of preparation:** February 2006.



Be the Skin Expert in your pharmacy



Supported by an  
educational grant from

**E45**

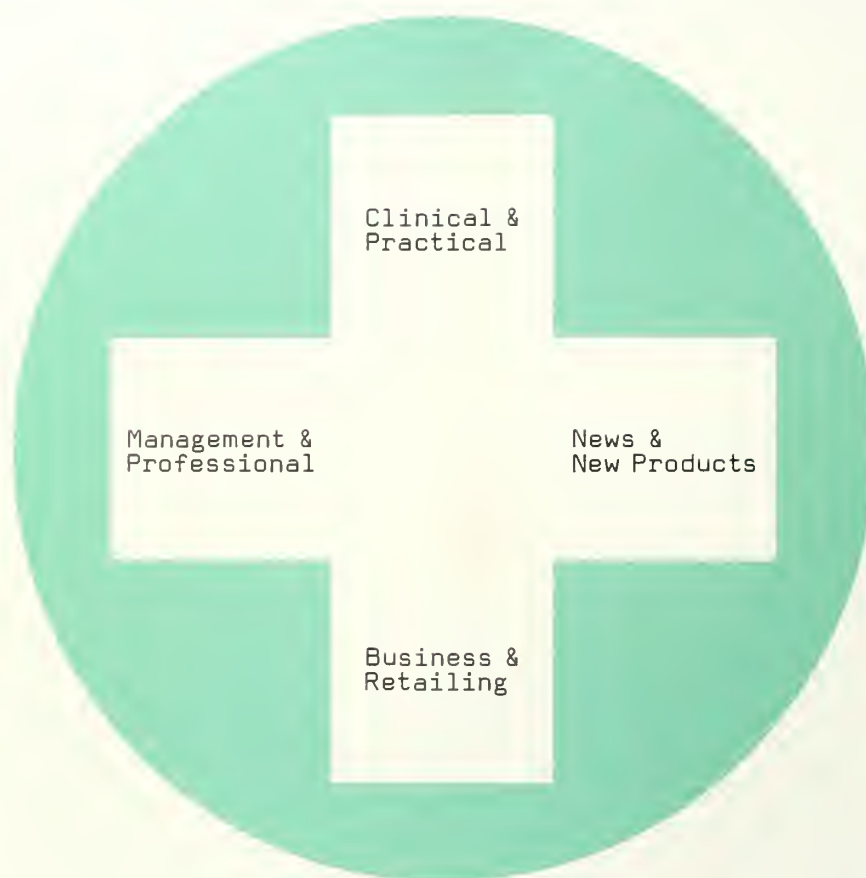
**Skin Expert**  
TRAINING MODULE 2  
Management of Dry Skin Conditions and  
Effective use of Emollients

Module 1 gone missing?  
You can download both Modules from C&D's website at  
[www.dotpharmacy.com](http://www.dotpharmacy.com) until September 30, 2006



# PHARMACY TODAY

A helping hand with  
changes in pharmacy



● The essential practical guide to running, managing and creating a successful retail pharmacy business.

● **Stay one step ahead**  
*Pharmacy Today* is part of the C+D subscription package. If you would like to receive your own copy you can call our subscriptions hotline telephone number **01858 438 893**.

● You can also call this number if you have any subscription enquires, have changed contact details or would like to renew your existing subscription.



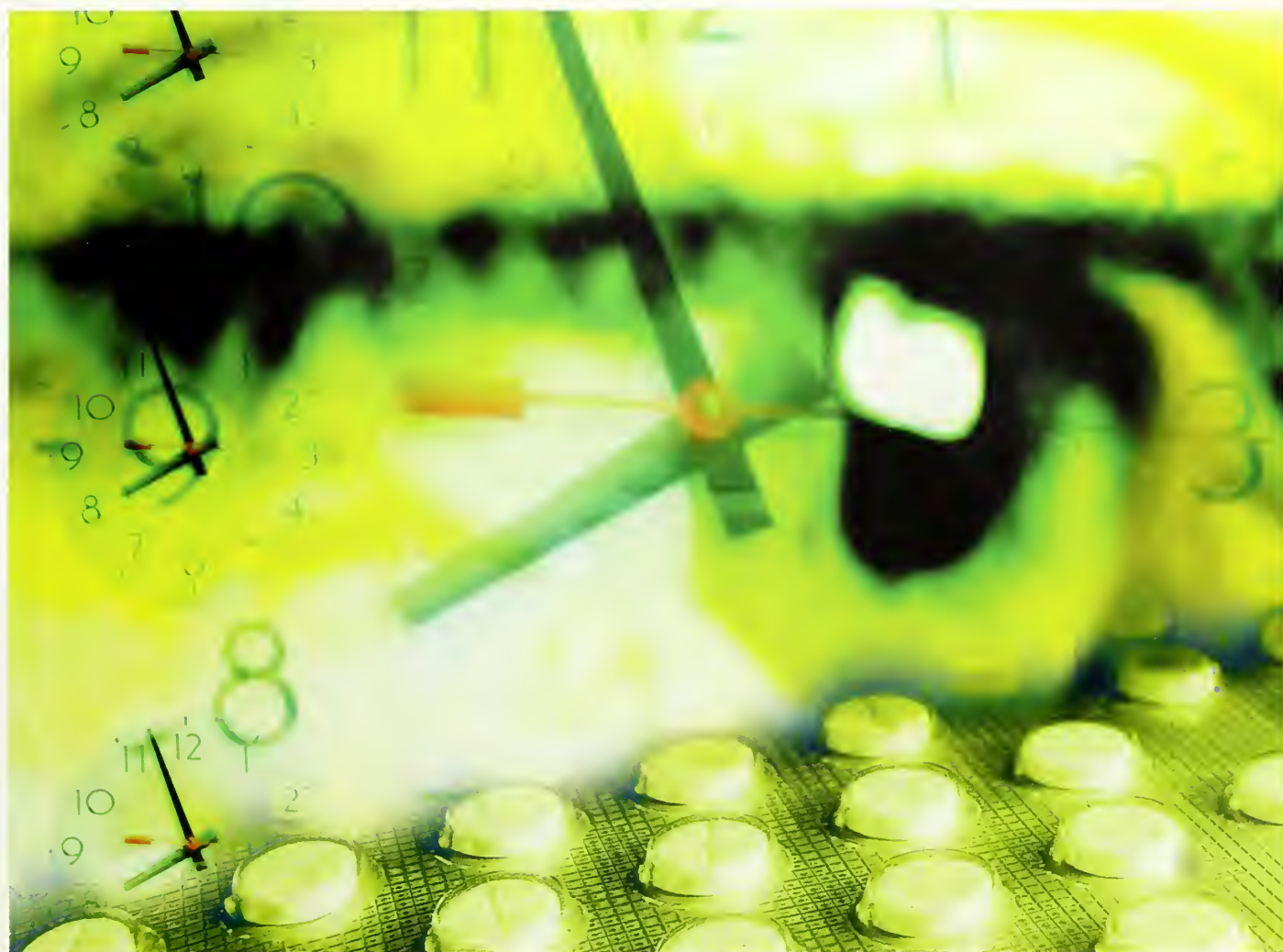
Adding Value to your  
Subscription Package



# C+D Clinical

## Getting patients into medicines

In the second of two articles on adherence, C+D advises on how to help patients use their medicines as they are intended



**Jon Silcock and Claire Standage**

Since the NHS was founded, pharmacists have focused on the accurate supply of prescribed medicines. Scientific advances mean that most medicines supplied today are safer and more effective than ever before – if used as intended. Unfortunately, this often doesn't happen, either because prescribers ignore the evidence base, or because patients don't follow the instructions accurately. The cost of the chronic medication not taken as prescribed – possibly as much as 50 per cent – means that many millions of pounds may be wasted each year, which could have supported patient care,

effective interventions and professional development.<sup>1</sup>

Increasingly, the solution to the problem of non-adherence is not seen simply as providing clearer instructions and explanations to patients, or extending the range of physical aids that can be supplied.<sup>2,3,4</sup> Instead, patients and professionals need to learn together about medicines they use or prescribe, and the circumstances in which we all live and work. Pharmacists are in a good position to influence prescribers and patients, but formal evidence to support the cost-effectiveness of complex or intensive pharmaceutical interventions is mixed.

### The College of Pharmacy Practice

This course (module 1368) in association with multiple choice questions being published in C+D June 3, provides one hour's continuing education



This article can help in the following CPD competencies: G1a, G1d, G1e, C1c, C4f, C3e. See [www.tinyurl.com/194zu](http://www.tinyurl.com/194zu)



# Pharmacy update

## Basic assessment

1. Does the patient have any physical or mental difficulties?
2. What modification to normal treatment is required?
3. What support is available from family or other carers?
4. What pharmaceutical monitoring is required?

## Levels of patient involvement

1. Passive acceptance of treatment.
2. Understanding of disease and treatment.
3. Active optimisation of treatment.
4. Self-management of chronic disease.

## Listening skills

1. Open posture, low barriers.
2. Encouraging noises and head movement.
3. Repetition of key words.
4. Summarising the problem.

## Simple questions to prompt patients

1. How are you today?
2. How are you getting along with the new tablets?
3. How is your breathing, pain etc? Have you lost a little weight?

## Simplifying medicines taking

1. Delete unwanted or unnecessary medicines.
2. Reduce dose frequency and/or change formulations.
3. Optimise doses.
4. Produce reminder/information chart.
5. Suggest association of tablet taking with a daily activity, for example meals, teeth brushing.
6. Provide multi-compartment compliance aid.

## Self-management

1. Detailed knowledge of disease and treatment.
2. Monitoring and recording symptoms.
3. Changing doses according to agreed protocols.
4. Peer group support.
5. Helping others.
6. Suggest sources for more information.

The previous article on adherence (C+D, April 15, p19-21) looked at research into the reasons for poor concordance. Here we describe some simple patient-focused tasks that should help pharmacists improve the quality of medicine use.

## Adherence: intentional and unintentional

Let's start with the basic idea that a medicine is one part drug and one part information: both parts perform a vital role. Patients' experience of what a drug does to them and their health knowledge are key indicators of intentional non-adherence. Ideally you should participate in a local strategy to increase patients' involvement. However, some patients have mental or physical problems that prevent greater involvement, in which case, careful assessment in consultation with other carers and social services is required.<sup>5,6,7</sup>

Assessment of vulnerable patients is often best done in the home. Pharmacy delivery drivers can make simple enquiries and feed back straightforward issues. If paid carers are supervising medication they will often follow care plans that need updating when changes are made. Any medicines dispensed separately from the compliance aid may well get missed and it may be useful to make links with local domiciliary care agencies to look at their approach to dealing with medication. Pharmacists should review and amend any patient-held documents started by nurses or social workers.

## Passive patients and supply focus

Many patients begin with an idea that medicines can be harmful, but most simply put their trust in prescribers to do the right thing, take their medicines as prescribed but don't think about the issues in great detail. We should generally try to make these patients more aware of their disease and its treatment, if only to help them plan for and understand future changes in therapy or quality of life. The road to better mutual understanding is likely to be long, and requires gradual practical and emotional changes for all concerned.

Sometimes patients don't see pharmacists as a source of clinical information; they are more interested in prescription waiting times and changes in the colour of their tablets. You may be able to change this attitude if you are prepared to modify your environment and behaviour. Patients respond to cues in the environment. Clean professional premises and private areas encourage more clinical interaction, but the converse is also true.

Simple questions may encourage patients to explore your knowledge. General concern and careful observation may also pick up on changes in health or something that is bothering a patient. This implies some continuity of staffing, which most patients greatly appreciate. Patients demand continuity of supply, which you can support with clear

procedures and documents for repeat prescriptions and owings.

## Understanding and trust

An unexpected side effect may prompt patients to ask questions or think critically about their treatment. We can only expect patients to tolerate adverse effects if they consider the benefits to outweigh the risks. The naturally curious may reach some level of involvement without the assistance of an unwanted cough or an upset stomach. You might be tempted to unleash your expert knowledge on those kind enough to ask for an opinion, but remember that the key skill in communication is listening, not explaining.

Patients value professionals who listen to their problems or questions before tailoring recommendations to their lifestyle. Given time, patients learn to trust professionals who advise them appropriately, which can lead to dependence. However, the goal of higher levels of patient involvement is independence, which can be interpreted either as coping by oneself or knowing how and when to seek effective help and support. You should be more concerned with supporting the latter, especially when dealing with disability or chronic disease.

## Active patients

Chronic disease can involve a deteriorating spiral of mental and physical health. Activities such as the NHS Expert Patient Programme (EPP) encourage physical activity and goal setting.<sup>8</sup> For many, the goals are fairly modest, such as putting on a coat or walking up a few steps, but should be achievable over a few weeks. You may grow your own 'active' patients or become increasingly aware of EPP 'graduates'.

Physical aids are available to support the achievement of medicine-related goals, but they require proper assessment. Too often we have solutions seeking problems rather than the other way round.

## Practical support

Multi-compartment compliance aids (MCAs) may be useful in two particular circumstances:

- To allow informal carers (family/neighbours), untrained family members or domiciliary paid care/social service workers to give (or prompt administration of) medicines to frail patients.
- As a memory aid for fairly alert patients with complex regimes.

Redispatching increases pharmacists' exposure to product liability and increases the risk of errors. The stability of medication in MCAs is an ongoing issue, posing the dilemma of degradation resulting in sub-therapeutic effect balanced against the risk of the medication not being taken at all if it is left out of the box.<sup>9,10</sup> For confused or disabled patients living alone, an MCA may be both hard to use and dangerous. Alternatives to full repacking include:





## Omega 3 Fish Oil in Honey

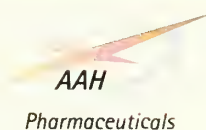


**ONLY  
£3.99 RRP**

PIP Code: 318-5147

**Stock up now as our  
Extensive Consumer PR Campaign  
Starts in May 2006**

*The following wholesalers stock a complete range of Valupak products*



Durham  
Pharmaceuticals



*J. Dougherty & Sons*



Call your preferred wholesaler or order direct from BR on

**0845 230 1499**



NEW

# REVEAL<sup>®</sup>

NO MESS TEST

Quick • Easy • Over 98% Accurate  
Hygienic to use • Results in minutes

ONLY  
£4.99 RRP



PIP Code: 228-8595


## No Mess Quality diagnostics

*The following wholesalers stock*

  
Mawdsleys

Durham  
Pharmaceuticals

*J. Dougherty & Sons*

  
AAH  
Pharmaceuticals



Call your preferred wholesaler

**0845 2**



**REVEAL**<sup>®</sup>  
PREGNANCY TEST

NEW

Quick • Easy • Over 99% Accurate  
Hygienic to use • Results in minutes

ONLY  
£4.99 RRP



PIP Code: 228-8710

Test Cups!  
at an affordable price

complete range of Reveal products



or order direct from BR on

0 1499



NEW



H E R B A L S

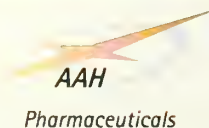


ONLY  
£1.29 RRP

PIP Code: 228-9593

*The Clear Alternative  
to Higher Priced Brands*

The following wholesalers stock a complete range of Valupak products



Durham  
Pharmaceuticals



*J. Dougherty & Sons*



Call your preferred wholesaler or order direct from BR on

**0845 230 1499**





Figure 1: Reminder form

| Name: Jo Bloggs                                |   | DOB: 1 Jan 1940   |                  | Address: 1 Green Lane, Middletown |                  | Allergies: Penicillin |  |
|--|---|---|------------------|-----------------------------------|------------------|-----------------------|--|
| Medicine names                                 |   | Doses at  |                  |                                   |                  | Reason                | Notes  |
| Generic name                                   | Brand name  | Breakfast   | Lunch            | Tea                               | Night            |                       |  |
| Alendronic acid<br>10mg<br>Oval white          | Fosamax   | One 30 mins<br>before food,<br>drink or other<br>medication,<br>with full glass<br>of tap water |                  |                                   |                  | Strengthen<br>bone    | Stand upright for 30<br>minutes after taking the<br>dose. Read full<br>information in patient<br>leaflet         |
| Calcium 500mg                                  | Calcichew D3<br>Forte   | Two   |                  |                                   |                  |                       | Not at same time as<br>Fosamax   |
| Furosemide 40mg<br>Round white<br>(small)      |   | Two (80mg)  | One (40mg)       |                                   |                  | Water tablet          | Monitor weight – tell<br>doctor about changes  |
| Paracetamol<br>500mg<br>Round white<br>(large) |   | Two<br>(1,000mg)  | Two<br>(1,000mg) | Two<br>(1,000mg)                  | Two<br>(1,000mg) | Painkiller            | Take no more than eight<br>tablets in 24 hours   |
| Warfarin 3mg<br>Round blue                     |   |   |                  |                                   | As advised       | Prevent<br>stroke     | Keep yellow anti-<br>coagulant booklet up to<br>date. Always show it to<br>your doctor, dentist or<br>pharmacist |
| GP   | Dr Ivor Pain, Middletown Surgery, 2 Back Street, Middletown. 01234 123456             |   |                  |                                   |                  |                       |  |
| Pharmacist                                     | Pharmacist Josie Cares, Green Cross Pharmacy, 3 High Street, Middletown. 01234 456789 |   |                  |                                   |                  |                       |  |

- Linking doses to daily events to improve memory.
- Careful selection of suppliers with clear pack markings.
- Traditional bottles and non child-resistant tops.
- Aids for specific difficulties such as dropper bottle squeezers.

Tablets in blister packs may be more easily 'scratched' out than pushed. It is also possible to obtain 'popping' devices. Although intended for dispensers to save their hands when decanting tablets into MCAs, these devices could be an option for patients struggling with blister packaging.<sup>11</sup>

The medicines use review (MUR) service is focused on patient understanding and may prompt you to make recommendations about unwanted medicines or simpler dosing. Chronic diseases such as asthma and heart failure are increasingly treated according to national guidelines, and GPs have to reach quality targets. Knowledge of appropriate guidelines may also lead you to suggest dose changes. Once medication is optimised, the simplest and often most highly valued intervention is a word-processed reminder chart. This may be handwritten on a template form (see Figure 1).

## Reminder charts

Reminder charts can contain as little or as much information as the patient wants. Templates are easy to create and modify to suit different circumstances. They can be completed or amended by hand, but should be restarted if they become untidy or unclear and once created are easy to update.<sup>12</sup> They can also be useful documents when patients are transferred between care settings.

Charts should provide an easy to read summary of essential basic information such as drug name, dose and indication, and can be used to highlight unusual or important information. The timing of doses is of practical importance to patients.

It is logical to list drugs in order of daily administration, rather than their prescribed order. The waking day may be more easily divided into roughly equal parts by meals or specific times, depending on the patient's lifestyle.

If patients are to be involved actively in medicines taking, written support of verbal messages is vital. Patient information leaflets are also important but benefit from

supplements that are specific to the patient or their disease. High quality disease-specific information is available from charities including the British Heart Foundation and Diabetes UK, and in PRODIGY leaflets.<sup>13</sup>

## Self-management

Self-management of chronic disease has several components. For some, a desire to self-manage is a progression from early stages of involvement and implies acceptance of the 'medical' way of doing things. For others, it is borne out of frustration with conventional medicine and uncaring practitioners. Self-management usually requires access to support, and pharmacists are uniquely accessible. Self-managers and the specialist nurses who support them may also help pharmacists to keep up to date with developments in medicine.

We'll know that the world of healthcare has really changed when patients routinely ask pharmacists for clinical advice and pharmacists are positively engaged with other professionals – and not just when pointing out their mistakes.

# Pharmacy update

## Key points

- Patients need to be made more aware of medicines management.
- Patients may manage side effects more effectively if they have a clear understanding that the benefits outweigh the risks.
- The key skill in communication is listening, not just explaining.
- Repackaging of medicines into compliance aids carries risks, consider other options.
- Simplifying dosage regimens may help optimise medication management.

Jon Silcock MRPharmS, MSc, is lecturer in pharmacy and Claire Standage MRPharmS, PG/Dip, is research pharmacist, Pharmacy Practice and Medicines Management Group, School of Healthcare, University of Leeds.

## References:

1. Medicines management services: why are they so important? *MeReC Bull* 2002 (12) 21-3.
2. Marinker, M.: From compliance to concordance: achieving shared goals in medicine taking. London: Royal Pharmaceutical Society; 1998.
3. Bond, C: Concordance — is it a synonym for compliance or a paradigm shift? *Pharm J* 2003; 271 No 7270; 496-497.
4. <http://www.medicines-partnership.org/>
5. Oboh, L: Pharmacists can help improve older peoples medicines management. *Pharm J* 2006; 276; 206-7.
6. Polak, M: Toolkit to help with single assessment. *Medicines Management* November/December 2002. No 6; 8. November/December 2002. [www.pjonline.com/pdf/mm/200211/mm\\_200211\\_toolkit.pdf](http://www.pjonline.com/pdf/mm/200211/mm_200211_toolkit.pdf)
7. [www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/SocialCare/SingleAssessmentProcess](http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/SocialCare/SingleAssessmentProcess)
8. [www.expertpatients.nhs.uk](http://www.expertpatients.nhs.uk)
9. Church, C, Smith, J: How stable are medicines moved from original containers to compliance aids? *Pharm J* 2006 276 75-81
10. [www.tabtime.co.uk](http://www.tabtime.co.uk)
11. [www.poppitts.com](http://www.poppitts.com)
12. Raynor, DK, Booth, TG, Blenkinsopp, A: Effects of computer generated reminder charts on patients' compliance with drug regimens. *BMJ* 1993 306. 1158-61.
13. <http://www.prodigy.nhs.uk>

## Continuing professional development

### Reflect

Do you feel you do enough to involve your patients in their treatment? Or do you think that many of them don't take their medicines as prescribed? Is discussing the side effects of medicines advantageous or detrimental for patients? Do you know an authoritative source for information on stability of drugs in compliance aids? Is there a greater risk of dispensing errors when using compliance aids rather than regular packs?

### Plan

Think about the advice you give when handing out a dispensed medicine. For example, is it better to refer to times or events in the patient's life, such as "after breakfast"?

If you read this article and carry out the suggested actions you will appreciate the problems that vulnerable patients have when taking medicines, enabling you to give better advice and offer practical solutions. You may wish to carry out an audit to find out the prevalence of non-adherence.

### Act

- If you haven't already done so, read the previous Update article on adherence (C+D, April 15, p19-21).
- Devise a clear and concise medication reminder chart for a patient you regard as vulnerable. Would he or she benefit from a compliance aid? If so, issue one.
- Carry out a medication review for five patients who are vulnerable, maybe because of polypharmacy (level 3 medication review – Room for Review 2002 <http://tinyurl.com/pvra>).
- Find out more about the effect of telling patients about the side actions of drugs.
- Read reference nine.

### Evaluate

Do you feel able to assist your patients with their medication and improve their adherence? What feedback did you receive from the patients you reviewed? Next time they come into the pharmacy try to establish whether their medicines adherence has improved. In a few months' time reassess these patients. Do you feel your time and advice were well rewarded? Are they using the medication reminder charts you devised? Do you need to take any further actions? Information on [www.expertpatients.nhs.uk](http://www.expertpatients.nhs.uk) may help.

## Distance learning for pharmacists

Pharmacists using Pharmacy Update for continuing education are reminded of the need to test. With the support of Genus Pharmaceuticals, C+D readers can self-test their progress by using the multiple choice question (MCQ) paper to be inserted in the June 3 issue, which will cover this week's CPP-accredited module, together with those in the May 13 and 20 issues.

These will cover:

- Adherence part 2 (1368)
- Amorolfine for nail infections (1369)
- Osteoporosis (1370)

A telephone marking service offers independent verification of results – details on the monthly MCQ papers. People wanting to register for Pharmacy Update can contact Pauline Sanderson on 01732 377269.

Chemist + Druggist  
in association with  
Genus Pharmaceuticals





# Herceptin moves towards early breast cancer licence

Roche has moved closer to having Herceptin (trastuzumab) licensed for early breast cancer.

But recent calls for the drug to be made available to all patients suffering from the disease seem unlikely to be met. The European drug regulator only adopted a positive opinion on widening the drug's licence to include adjuvant treatment of invasive, non-metastatic early breast cancer over-expressing HER2 following surgery, chemotherapy and radiotherapy (if applicable).

Other positive opinions adopted by the European Medicines Agency included extending the use of Betaferon (interferon beta-1b) to early multiple sclerosis. Tysabri (natalizumab),

another MS treatment – suspended last year – also got the green light.

Sanofi-Aventis' Acomplia (rimonabant) looks set to launch for the treatment of obese and overweight patients, with associated risk factors such as type 2 diabetes or dyslipidaemia, in conjunction with a diet and exercise programme. Other products to get a preliminary go-ahead included Avaglim (rosiglitazone plus glimepiride) for type 2 diabetes, and Baraclude (entecavir) for chronic hepatitis B.

**For more information:**  
[www.emea.eu.int](http://www.emea.eu.int)

## New iron chelator shows promise

A new drug looks likely to ease the lives of thalassaemia patients who require regular blood transfusions. A trial has shown high dose deferasirox to be as effective as deferoxamine at reducing iron overload, and generally well-tolerated, with the most common side effects being GI problems (15 per cent). In addition,

researchers felt that deferasirox's once-daily, drinkable formulation made it more convenient than injectable deferoxamine.

**For more information:**  
Blood 2006; 107: 3455-3462

### In brief

#### First RLS drug

Mirapexin (pramipexole) has become the first product to be licensed for restless legs syndrome in the UK. Recommended dosing is one 88mcg tablet taken once daily, two to three hours before bedtime. If required, the dose may be increased every four to seven days to a maximum of 540mcg. The patient's response should be evaluated after three months. For more information: Boehringer Ingelheim, tel: 01344 424600.

#### Acupan stock problem

Acupan 30mg tablets (nefopam hydrochloride) are currently out of stock, with supplies likely to resume in June. For more information: 3M Health Care customer services, tel: 01509 613082.

#### Livwell bread

Five Livwell dietary products have gained ACBS status and been listed in the Drug Tariff, says Generpharm. They are: Livwell white sliced bread, brown sliced bread, white baguette, four white rolls and uncut white loaf (Baker's Delight). For more information, see Pricelist.



## NRT gets backing

Smokers are less likely to give up giving up if they use nicotine patches – even those who sneak the occasional cigarette.

A study published in the Journal of Consulting and Clinical Psychology analysed 324 smokers using either a nicotine or placebo patch to help them quit over five weeks. Nearly all the patients in the active group (97 per cent) successfully stopped smoking on their target quit date, compared to only 80 per cent of placebo subjects. Furthermore, those using a nicotine patch were considerably less likely to lapse and seemed better equipped to prevent the slip becoming a full relapse.

**NRT patches help smokers preparing to quit smoking**

**For more information:**  
[www.apa.org/journals/ccp](http://www.apa.org/journals/ccp)



**HEALTHY GUMS. HEALTHY LIFE.™**

The UK Pharmacy market potential for oral care products is unlimited

Are you stocking the leading "state of the art" oral care brand?

G.U.M.® products are specifically designed to prevent the causes of periodontal disease, not just the symptoms.



**G.U.M.® helps you - the Pharmacist to:**

- help consumers select the right products for their specific needs.
- help consumers through efficient oral health procedures

For more information, help and advice on what to stock and to find out how you can benefit from the Butler G.U.M.® range of products and details of promotional displays call:

Phone: 01926 461 610  
Fax 01926 461 616



Sole UK and Ireland distributors for Butler G.U.M.® products

## GSK attacks acid erosion



Sensodyne Pronamel toothpaste has been launched by GlaxoSmithKline to tackle acid erosion.

According to GSK, acid erosion of the teeth is a growing problem associated with a modern diet. Acidic foods include grapes, apples, lemon juice, tomatoes, fruit teas and red wine but most people are unaware that consuming them can damage their teeth.

Early signs of acid erosion include sensitivity, discolouration and rounded teeth. In later stages teeth become transparent at their edges, discoloured, cracked and dented.

Sensodyne Pronamel hardens tooth enamel, bolstering its

resistance to acid attack. The mint-flavoured paste is pH neutral and low in abrasion, says GSK. It should be used twice daily in place of regular paste. GSK recommends positioning the product on shelf to the left of the Sensodyne fixture.

Consumer advertising, PR and professional communication to raise the profile of acid erosion is planned.

### Product info:

Pip code: £3.55/75ml, 320-7859

GlaxoSmithKline

Tel: 0845 762 6637

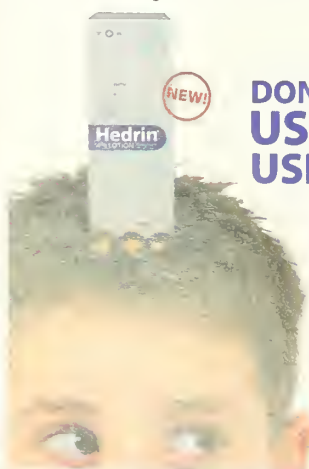
## T&R is using its Hedrin to tackle head lice problem

A £2 million campaign supporting Hedrin (4 per cent dimeticone), the head lice treatment from Thornton and Ross, begins this week.

The 'Use your head, use your Hedrin' advert is running on GMTV and satellite channels over the next five weeks, targeting mums with the message that lice can be

treated without pesticides or time-consuming combing. Further activity later this year will have a back to school focus.

Supporting the TV activity, PR and advertising is running in the women's and national press. Point of sale materials include window displays, dummy packs and leaflets.



**DON'T LOSE YOUR HEAD  
USE YOUR HEAD  
USE YOUR HEDRIN**

Thornton and Ross  
Tel: 01484 842217  
www.hedrin.co.uk

## Beating bloating

Aquaban and Aquaban Herbal are appearing on television in a £900,000 campaign expected to reach 13 million viewers.

The two diuretic products from Lanes will be seen from this month until July on Channel 5, GMTV and satellite channels. The 'top button giving you trouble' creative was seen on TV last year but has been updated to incorporate the new Aquaban Herbal variant. The ad aims to convey the message that pre-menstrual bloating is a symptom of PMS that can be treated quickly and effectively. The company hopes to attract women wanting to avoid looking bloated over the summer period.

Point of sale materials including showcards, shelf wobblers and leaflets are available.

GR Lane Health Products

Tel: 01452 507458

www.aquaban.co.uk

## Comfort zone for footcare

Scholl's footcare range has been expanded with the addition of three products. Toenail Conditioner reduces thickening and helps prevent splitting of nails. The pen-shaped product incorporates a brush applicator.

Rehydrating Moisture Mousse immediately softens and hydrates the skin of the feet. It protects from drying and is easily absorbed. The mousse is suitable and recommended for diabetics, says Scholl.

Cracked Heel Repair Cream contains anti-inflammatory, antiseptic and healing ingredients to treat rough, dry and cracked skin. It is fragrance free and suitable for sensitive skin and diabetics. Twice daily use is recommended.

All of the products contain urea to help retain moisture. The mousse and cream will be supported by sampling, advertising, press and PR activity.

### Product info:

Pip codes: conditioner £4.49/1.6ml, 321-2743; mousse £5.99/125ml, 320-7875; cream £5.49/60ml, 320-7453 and £2.99/25ml, 231-8582

SSL International  
Tel: 0870 122 2689  
www.scholl-footcare.com

### Inflammation update

New editions of 'Understanding Angina and Heart Attacks' and 'Understanding Depression' are now available, designed to give greater information than can be covered in a GP consultation. Pip code: 232-8300 (Angina/Heart attacks); 232-8326 (Depression) Family Doctor Publications £4.75 Tel: 01202 668330 www.familydoctor.co.uk

### Flapping about bird flu?



Hand sanitiser No Germs has been shown to be effective against avian flu. The independent tests, carried out by Retroscreen Virology, found the product to be more than 99.8 per cent effective against the virus.

No Germ contains no alcohol, fragrance or paraben and can sanitise hands without washing. Advanced Formulations Tel: 0208 640 4444 www.advancedformulations.com

### Skincare with calcium

Age Re-perfect Pro-calcium, designed to meet the skincare needs of women over 60, has been launched by L'Oréal. The SPF15-rated cream provides calcium which helps strengthen the skin, boosting its barrier function and limiting water loss, claims L'Oréal. Price: £14.99 L'Oréal Tel: 0161 655 1400

### Learn more about EFAs

A diploma correspondence course in eight modules for pharmacists who wish to learn more about essential fatty acids is available from Efamol. Efamol Tel: 01757 633888



Dust mites  
4,997,000 Britons

Aftershave  
933,000 Britons

Sunscreen  
342,000 Britons

Pigeons  
303,000 Britons

Photocopier toner dust  
222,000 Britons

Feathers  
1,416,000 Britons

Tomatoes  
526,000 Britons

Squirrel fur  
181,000 Britons

Breath spray  
226,000 Britons

Acrylic glue  
478,000 Britons

Wasp stings  
5,593,000 Britons

Windscreen wiper fluid  
290,000 Britons

Moisturiser  
412,000 Britons

Ants  
1,095,000 Britons

Pollen  
6,690,000 Britons

Hair dye  
576,000 Britons

Deodorant  
1,957,000 Britons

Paint dye  
371,000 Britons

Bee stings  
4,612,000 Britons

Mosquito bites  
6,512,000 Britons

Rats  
498,000 Britons

For allergy sufferers  
it's a jungle out there...

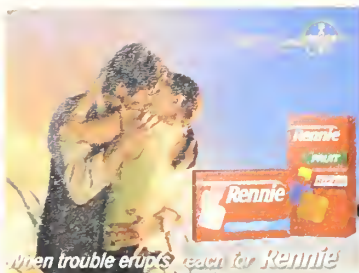


# It now goes for the fruity option

Indigestion remedy Rennie has been relaunched and expanded in a £6 million initiative. Packs of the newcomer Rennie Fruit (500mg calcium carbonate), contain four flavours: blackcurrant, raspberry, orange and lemon.

The relaunch sees Rennie branding across the range and modernised packaging, making each product easy to identify, says Bayer.

Supporting the relaunch, peak time television advertising begins this month. The ad shows a volcano as a metaphor for a stomach suffering from heartburn and indigestion with Rennie using its neutralising action to save the day. The Fruit variant is



introduced to viewers in a bid to drive product trial. Point of sale materials are available.

Ceuta Healthcare  
Tel: 01202 780558

## Shut out the noise

Ear plugs in four styles have been launched by Fortuna Healthcare, replacing the company's existing earplugs.

Foam Ear Plugs in torpedo and barrel shapes are suitable for use when sleeping, travelling and in noisy environments. The torpedo ear plugs with a noise reduction rating of 26dB

are made of polyurethane and are rolled before insertion into the ear, making them suitable for smaller ears, says Fortuna. With a classic ear plug shape and noise reduction rating of 24dB, the barrel variants are made of PVC. Both are described as dermatologically safe.

Mouldable Silicone ear plugs and Mouldable Wax with Cotton ear plugs have a noise reduction rating of 20dB and are watertight so can be used when swimming or showering.

### Product info:

Pip codes: torpedo 322-0670; barrel 322-0654; silicone 322-0696; wax 322-0688

Fortuna Healthcare  
Tel: 020 8805 7805



## Optrex lubricates eyecare



Eyecare brand Optrex is launching two products to provide relief for eyes that feel dry.

Optrex Dry Eyes Lubricating Eye Drops contains sodium hyaluronate to restore the eyes' natural moisture balance. The treatment lasts up to seven times longer than hypromellose and polyvinyl alcohol, claims Reckitt Benckiser. The preservative-free drops are suitable for contact lens wearers.

Optrex Dry Eyes Lubricating Liquid Gel contains carbopol and forms a protective film over the surface of the eye, spreading across it every

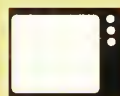
time the user blinks, necessitating four applications a day or fewer, says the manufacturer.

Brand support for Optrex this year totals £3 million, including an educational campaign.

### Product info:

Prices, pack sizes and Pip codes: drops £4.29/10ml, 320-2538; gel £5.59/10g, 320-2678

Reckitt Benckiser  
Tel: 01482 326151



### Products advertised on TV next week

**Aquaban:** GMTV, five, Sat

**Aquaban herbal:** GMTV, five, Sat

**Dulcolax:** C4, GMTV, Sat

**Hedrin:** GMTV, Sat

**Natravene:** All areas except C4

**Optrex Dry Eyes:** All areas

**Optrex Lubricating Liquid Gel:** All areas

**Rennie:** All areas except CTV

**Seabond:** All areas

**TCP Spray Plaster:** All areas

**Ymea:** GMTV, Sat

**PharmaSite for next week:** Clarityn – Windows, Clarityn – In-store,

Pepto Bismol – Dispensary

**Pharmacy channel:** Scholl Freeze, Pfizer Regaine

A-Anglia, B-Border, C-Central, C4-Channel 4, five-Channel 5, CAR-Carlton, CTV-Channel Islands, G-Granada, GMTV-Breakfast Television, GTV-Grampian, HTV-Wales & West, LWT-London Weekend, M-Meridian, Sat-Satellite, STV-Scotland (central), TT-Tyne Tees, U-Ulster, W-Westcountry, Y-Yorkshire

AND NOW...



**POWERGEL™**  
Ketoprofen

## The power to zap pain

Prescribers are recommended to consult the summary of product characteristics before prescribing, particularly in relation to side effects, precautions and contraindications. Further information is available on request to **A. Menarini Pharma U.K. S.R.L.** Menarini House, Mercury Park, Wycombe Lane, Wooburn Green, Buckinghamshire, HP10 0HH, UK

Information about adverse event reporting can be found at [www.yellowcard.gov.uk](http://www.yellowcard.gov.uk). Adverse events should also be reported to **A. Menarini Pharma U.K. S.R.L.**  
Phone no: 01628 856400 POW/PBC/101/04/06 April 2006



...in a pump





...so recommend Piriton

The fact is, people can develop an allergy to just about anything, not just pollen. So when your customers ask you about allergies, tell them about Piriton. No brand has the power to treat more allergies.

**Millions of allergens. Only one Piriton.**



Chlorphenamine

**Piriton Allergy Tablets and Piriton Syrup Product Information.** Presentations: Tablets containing 4 mg chlorphenamine maleate. Syrup containing 4 mg chlorphenamine maleate in 10 ml. Uses: Symptomatic relief of chickenpox itch and allergic conditions including hayfever. Dosage and administration: Tablets: Adults: 1 tablet every 4-6 hours. Children aged 6-12: ½ tablet every 4-6 hours. Syrup: Adults: 10 ml every 4-6 hours. Children aged 6-12: 5 ml every 4-6 hours. Children aged 2-6: 2.5 ml every 4-6 hours. Children aged 1-2: 2.5 ml, twice daily. Contraindications: Hypersensitivity. Concurrent or recent treatment with MAOIs. Precautions: May increase effects of alcohol. May affect ability to drive and use machinery. Use with caution in prostate, respiratory, liver, cardiovascular and thyroid disease; epilepsy, glaucoma and other eye conditions. Syrup contains sugar, use with caution in diabetes. Maintain good dental hygiene. Side effects: Sedation. Less commonly gastrointestinal disturbances, blurred vision, headaches, urinary retention, dry mouth, muscular incoordination, jaundice, cardiac conduction disturbances, chest tightness, dizziness, blood dyscrasias, allergic reactions, tinnitus. Children and the elderly are more prone to the neurological anticholinergic effects and rarely may become confused. Pregnancy and lactation: Consult doctor before use. Legal category: P. Product licence numbers: Tablets: PL 00036/0091, Syrup: PL 00036/0088. Product licence holder: GlaxoSmithKline Consumer Healthcare, Brentford, TW8 9GS, U.K. Package quantity and RSP: Tablets 30s £3.15, Syrup 150 ml £3.99. Date of last revision: October 2004. Piriton is a registered trade mark of the GlaxoSmithKline group.



# Art of the matter

Damien Hirst's new book *Pharmacy* is fascinated by pharmacy. Damien Hirst explains why

## Damien Hirst on:

### Pharmacies vs supermarkets

"If you go into a supermarket all the products are screaming out for your attention. In a pharmacy it's much more reserved. All the packages are being cool. Baked beans are not cool."

### GPs

"I don't find GP surgeries as influential as pharmacy as they are far less clinical. They're much more homely."

### Pharmacists

"I had a pharmacist looking at a sculpture and he couldn't work out why I'd put the drugs in a particular order. I told him that, being an artist, it was purely by colour."

### C+D

"I find it very interesting. Some of the pictures in it would make great paintings."

### Philosophy

"The three most important things in life are religion, medicine and art. But only religion and medicine are life and death."



Picture by: Stefan Rousseau/Empics

## Max Gosney

Next time you scan around your pharmacy take a closer look at the everyday displays of medicine boxes and bottles stacked up on shelves, advises artist Damien Hirst.

The colours and shapes of containers from cough medicines to headache pills create an artistic impression in the mould of the ceilings of the Sistine Chapel, he says.

"A pharmacy is like an art gallery," explains Mr Hirst. "I've always loved minimalism and pharmaceutical packaging takes a lot from simple forms and geometry."

The profession has been a focus point for one of the UK's most famous artists, with Mr Hirst's work including a mock-pharmacy installation at London's Tate Modern and the now defunct restaurant, Pharmacy, in Notting Hill.

Currently the Turner Prize winner is running the pharmacy London project, which aims to photograph pharmacists in Greater London behind the counter of their business. "I always think you make art for people who haven't been born yet. The book will give future generations an idea of a moment in time," he says.

With over 500 pharmacists already photographed, the project has been a labour of love, explains Mr Hirst. "I remember as a kid going into a local pharmacy and being intrigued by the old bottles. Then as an art student I would collect empty drug boxes from the back of pharmacies. I love the crosses and signs."

Mr Hirst is inspired by the power of pharmacy products over people's lives. He explains: "There's a serenity with every medicine, that you believe they're going to help you," he explains. "What got me is that people's belief in their drugs is unquestionable. However, with art they have a questioning belief. Every medicine you take has a list of side effects but you never think that anything can go wrong. I want people to believe in art as they do in medicine."

Pharmacists have greeted the attentions of a celebrity towards their profession with caution. Mr Hirst received a rap on the knuckles from the Royal Pharmaceutical Society when he christened his Notting Hill restaurant 'Pharmacy'. He says: "The RPSGB complained that the name was misleading and now on reflection I can understand it. We did get people coming to the bar at the time with prescriptions. But, I was drinking a lot at the time and thought it was funny."

The name was replaced by a series of anagrams of the Pharmacy title. But Mr Hirst was not able to rescue the ailing business, which closed in 2003. "I was very upset when it closed down. I was worried that people would not want to go out for a meal in a pharmacy environment. But it worked better than I imagined." The concept has been carried forward, adds Mr Hirst. "I have used some of the fittings to create a pharmacy room in my restaurant at the harbour in Ilfracombe, North Devon."



Other memorabilia, including pill-shaped bar stools and drug themed wallpaper, fetched over £11 million when auctioned at Sotheby's.


Proceeds from the sale could fund further forays into pharmacy in the future, Mr Hirst reveals. "I've got a friend in Ilfracombe who's got a pharmacy with lots of the original fittings, which looks great. I've thought about buying it. Perhaps if I see anything suitable it's something I'd consider."

But, for now, Mr Hirst remains an enthusiastic pharmacy goer. Currently picking up a prescription for Nexium, the artist is an advocate of pharmacists providing extra healthcare support.

"There's a great pharmacy in Marble Arch, which

The three most important things in life are religion, medicine and art. But only religion and medicine are life and death





When is a pharmacy not a pharmacy? Artist Damien Hirst looks through one of his works – 'The Four Elements'. Picture by: Andy Butters/PA/Empics

use when I am in London," he explains. "I was going out for dinner and feeling unwell so I dropped in to pick up some Nurofen. I asked the pharmacist whether there was anything else I should take and he told me to drink plenty of water and eat lots of food. That seemed to work."

## Damien Hirst: the low-down

### Background

Born in 1965 in Bristol, Damien Hirst achieved an E grade at art A level. However, he went on to study art at Leeds and gained a degree in fine art from Goldsmiths College, London in 1989. He was spotted by Charles Saatchi who featured his work at his London gallery.

### Famous work

Mr Hirst is either revered or reviled for work including 'The physical impossibility of death in the mind of someone living' – a shark placed in a

tank of formaldehyde, and 'Mother and child divided' – a cow and calf chopped in two, which won the 1995 Turner prize.

### The pharmacy factor

Mr Hirst began to collect drug packaging for his work as an art student in Leeds. He opened the Pharmacy installation at the Tate Modern in 1997 and went on to launch a bar and restaurant, Pharmacy, in Notting Hill in 1999. He is currently trying to photograph every pharmacist in London for a book. The fascination is in the of medicine over people's lives, says Mr Hirst.

# Pain, no gain

Will the steady-state product category a pain, or is relief on the horizon?

Asha Fox-Edwards

The overall OTC market of £21 billion, total pain relief rules in fact it rules to the tune of £473 million. That's a lot of pain being battled (and hopefully killed).

The category encompasses adult oral analgesics (68 per cent), paediatric pain relief (14 per cent), topical treatments (12 per cent), and products for oral lesions and toothache (6 per cent). However, in terms of adult oral analgesics, the market is fairly static. Though pill volume is up 2.7 per cent, pack sales are down 2.1 per cent, which in value terms equates to a 0.5 per cent drop.<sup>1</sup>

However, it's not bad news for pharmacy, where market share is up 0.2 per cent to 51.4 per cent, or £177m.<sup>1</sup> Phill Barnett, senior trade marketing manager for Wyeth's Anadin, says that pharmacy sales tend to be of higher priced, large pack sizes, and this drives value into the category. Grocery and impulse outlets may shift more packs, but they tend to be smaller and cheaper, he explains.

The number one manufacturer is Reckitt Benckiser (which recently took over Crookes), maker of Nurofen, the top selling OTC painkiller (38.7m packs worth £85.9m).<sup>1</sup> GlaxoSmithKline Consumer Health is the number two manufacturer, with a portfolio that includes Solpadeine (the recently renamed Solpadeine Plus is the lynchpin and is the top selling pharmacy-only brand), Panadol and Hedex.

Wyeth Consumer Health occupies the number three spot, though overall its Anadin range is

second only to Nurofen (over 25m packs a year worth £44.3m), and claims that the 16-pack of Anadin Extra is the top-selling OTC medicine.<sup>1,2</sup> The honour of the fastest growing oral analgesic brand is claimed by SSL International for Paramol, though it has just a 2.1 per cent market share overall.<sup>3</sup>

One of the reasons the category is relatively flat is the fact that OTC painkillers are dominated by three ingredients – paracetamol, ibuprofen and aspirin – restricting new product development. Other factors include price wars and promotions, which drive volume but do little in terms of value, and own-brand products.

The next big boost to the OTC analgesics category looks likely to help migraine sufferers. Last August, the Medicines and Healthcare products Regulatory Agency published a consultation paper on the proposed reclassification of sumatriptan and zolmitriptan from prescription-only to pharmacy status. However, as yet, there is no news as to if, or when, either product may launch.

Mimi Lau, professional services controller for symbol group Numark, says training will determine the success of the switch. Pharmacists and their staff not only need to know about the drugs and

## The next big boost to the OTC analgesics category looks likely to help migraine sufferers

how quickly they work, but will also need to feel confident diagnosing migraine and providing lifestyle advice on managing the condition, she warns.

In the meantime, GSK has launched Solpadeine Migraine tablets (ibuprofen 200mg and codeine phosphate 12.8mg), a pharmacy-only formulation described by the company as "bridging the gap between simple analgesics and prescribed triptans". GSK expects the product to appeal to migraine sufferers who respond well to painkillers and don't suffer from nausea.

Similarly, Reckitt Benckiser recently strengthened its migraine offering with the introduction of Nurofen Maximum Strength Migraine Pain (ibuprofen lysine 684mg). A P medicine, the company says it should be taken as early in a migraine attack as possible to maximise drug absorption before gastric stasis occurs.

Within the paediatric pain market, Calpol remains king, with a 63.1 per cent unit share and a total market value of around £40m.<sup>4</sup> The brand has been boosted by a recently granted licence



### Nurofen Max Migraine

Nurofen Maximum Strength Migraine Pain has been formulated to be absorbed more than twice as fast as standard ibuprofen, says Reckitt Benckiser



### Voltarol Emulgel

Novartis's Voltarol brand has grown by 26 per cent to command a 6 per cent share of the topical analgesic market

extension that allows Calpol Infant Suspension to be given to children from two months of age for up to two doses without the initial intervention of a GP. The 100ml pack is now a GSL medicine, but pharmacy sales are likely to be helped by Pfizer Consumer Health's decision to launch a 200ml P pack last October.

Topical preparations are increasingly popular, with the category growing at 9 per cent. One of the brands contributing is Voltarol Emulgel, which has shown an uplift of 26 per cent. The major reason for this growth has been the introduction of Voltarol Pain-eze Emulgel 30g,





Consumers are creatures of habit, so raising awareness about conditions and highlighting new products can create merchandising opportunities

which Novartis Consumer Health says has, for the first time, allowed self-selection of topical diclofenac.<sup>5</sup>

So what can pharmacy proprietors do to maximise analgesic sales? Wyeth's Amanda Tillott, Anadin marketing manager, warns against trying to compete on price, saying: "Pharmacy needs to offer something over and above grocery. Independent pharmacies can't compete with the likes of Tesco on price, but can offer advice and reassurance."

Merchandising can make a big difference, says Wyeth's Phill Barnett. Simple things like ensuring

the pharmacy back wall and self-selection medicines are easy to navigate will help both pharmacy staff and customers. Targeting impulse shoppers, for example by siting analgesics near the sanitary protection fixture, pushes link sales, he suggests.

Pharmacists often despair at the number of medicines that gain GSL status, but they can capitalise on the opportunity, says Mr Barnett. He advises displaying dummy packs or prompt cards, so customers know they can get bigger packs of the same product, or a stronger version

of a brand they know and trust, from the pharmacy counter.

Other tips include focusing on ailments, not brands, by raising awareness about conditions and highlighting new products. "Shoppers are creatures of habit, so it's very important for the pharmacist or pharmacy to ensure they provide advice or highlight in the fixture what are new products," he recommends.

Mr Barnett's final tip can be found on the pages of this very magazine – checking what's being advertised (by using C+D's On TV guide) to inform stock ordering. As he points out, customers may want a number of items, but if a pharmacy doesn't have the first one, why should they stick around to find out about the rest? Being out of stock is a poor excuse for losing trade, he stresses.

#### References:

1. IRI 52 w/e 18 Feb 06 (courtesy of Wyeth).
2. IRI Top 10 OTC SKUs Total Outlets Oct 05 (courtesy of Wyeth).
3. IRI Quadweek Performance 4 w/e 24 Jan 06 (courtesy of SSL).
4. IRI 52 w/e 1 Oct 05 (courtesy of Pfizer).
5. IRI All HBA Outlets, Value Sales, 52 w/e 18 Feb 06 (courtesy of Novartis).

#### Solpadeine Migraine

GSK describes the recently launched Solpadeine Migraine as the bridge between simple analgesics and prescribed triptans



#### Anadin Extra

While Anadin is the number two analgesic brand, Anadin Extra 16s is the UK's top selling OTC medicine pack<sup>3</sup>

#### Calpol

Although Calpol Infant Suspension 100ml is now GSL, Pfizer says this won't damage the pharmacy sector as the majority of shoppers seek professional advice so they can treat their children's ailments with confidence





# ...is the alternative?

One area of analgesics is enjoying a period of astonishing growth

The analgesics sector may appear to be standing still, but one area is showing phenomenal growth. In just one year, sales of pain relief pads and patches have shot up by 115.3 per cent, making the devices an important part of the topical analgesics fixture.



The Mentholum Company's WellPatch Deep Heat Patch is leading the pack, achieving 4190.7 per cent growth in a year to command 10 per cent of the market. The company is hoping to build on its success with the launch of a four patch pack.



A related but slightly different type of product has been introduced by Proctor & Gamble. ThermoCare is a drug-free, single use wrap that heats up to 40°C within 30 minutes of being unwrapped. The company says that the size, location and spacing of the cells (containing iron, charcoal, salt and water) ensure heat is broadly and evenly distributed to the affected area for eight hours and, if used correctly, can provide the wearer with up to 16 hours of relief. An added advantage of the wraps is that they can be used at the same time as oral analgesics.



It's not just patches and pads that are enjoying such success. Charlotte Cox, head of marketing for Nelsons, says that more and more consumers are turning to complementary remedies rather than allopathic medicines. She illustrates this by highlighting three homeopathic products that have seen a significant upturn in sales: Belladonna for headache and earache, which is up 34 per cent in volume terms year on year; Arnica for bumps, bruises and strains, up 15 per cent; and Teetha for infant teething, up 11 per cent.<sup>2</sup>

Ms Cox says this move towards alternative health products is set to continue as consumer awareness rises. Under the EC directive on herbal medicinal products, more remedies are likely to be licensed later this year, which will mean manufacturers can state indications on product packaging and make it easier for customers to identify appropriate products.

Indications on packs will also help pharmacists and their staff make suitable recommendations, says Ms Cox, explaining: "At the moment, unless you have a retailer who really knows what he's



doing, or has time to research the products, it can be difficult." Merchandising will also become easier, with traditional and allopathic products more likely to share shelf space (for example, Teetha next to Calpol and Calgel), she adds.

#### References:

1. IRI 52 w/e 18 Feb 06 (courtesy of Mentholum).
2. Boots 52 week EPoS data (courtesy of Nelsons).

Advertisement feature

## ARheumacare – a unique formulation

ARheumaCare from Health Perception is a new unique tablet and capsule formulation providing a combination of ingredients specifically formulated to help keep joints healthy and flexible.

ARheumaCare capsules contain a special blend of Cod liver Oil, Gamma Linolenic Acid (GLA) and Omega 3, providing the body with a vital combination of essential fatty acids and nutrients such as Vit D and Vit E, which are responsible for forming the membranes around every cell in the body and can help to keep your joints supple and flexible.

Glucosamine is the naturally occurring constituent responsible for forming the building blocks of connective tissues such as cartilage, tendons and ligaments. As well as

the benefits of glucosamine, each ARheumaCare tablet also contains the added benefits of Turmeric and Ginger which have been associated with joint mobility for decades for their antioxidant and warming properties respectively.

Supplementing your daily diet with the ARheumaCare combination is a convenient way to ensure your intake of important nutrients plus fatty acids, and plays a vital role in the care and protection of the joints.

**ARHEUMACARE (30+30) RRP: £12.99**

For more information about ARheumaCare or any of the products within Health Perception's healthy joints range, please contact us on 01252 861454 or visit [www.health-perception.co.uk](http://www.health-perception.co.uk)





# Triple Action Anadin Extra\*

Paracetamol  
helps block pain  
messages getting  
to the brain

Caffeine  
accelerates  
pain relief

Aspirin  
targets the point  
of pain



## The UK's No1-selling OTC pack<sup>1</sup>

**ANADIN® EXTRA. Presentation:** Tablet for oral administration. Each tablet contains Aspirin BP 300mg, Paracetamol Ph Eur 200mg, Caffeine Ph Eur 45mg. **Indications:** For the treatment of mild to moderate pain including headache, migraine, neuralgia, toothache, sore throat, period pains. Symptomatic relief of sprains, strains, rheumatic pain, sciatica, lumbago, fibrositis, muscular aches and pains, joint swelling and stiffness, influenza, feverishness and feverish colds. **Dosage:** Adults, the elderly and young persons aged 16 and over: 2 tablets every 4 hours to a maximum of 8 tablets in 24 hours. Not for children under 16 years unless on the advice of a doctor. **Contraindications:** Hypersensitivity to the active ingredients or any of the constituents. Peptic ulceration and those with a history of peptic ulceration, haemophilia, concurrent anticoagulant therapy, children under 16 years and when breastfeeding because of possible risk of Reye's Syndrome. **Interactions:** Aspirin: Concurrent use of other NSAIDs or corticosteroids may increase the likelihood of GI side effects. Diuretics: Antagonism of the diuretic effect. Anticoagulants: Increased risk of bleeding due to antiplatelet effect. Metoclopramide increases the rate of absorption of aspirin. Phenytoin: The effect may be enhanced by aspirin. Valproate: The effect may be enhanced by aspirin. Methotrexate: Delayed excretion and increased toxicity of methotrexate. Paracetamol: Cholestyramine: Absorption is reduced by cholestyramine. Metoclopramide and Domperidone: Absorption is increased by metoclopramide and domperidone. Warfarin: Potentiation of warfarin with continual high dosage of paracetamol. Chloramphenicol: Increased plasma concentration of chloramphenicol. **Special warnings and precautions:** Use with caution in patients with asthma, allergic disease, impairment of hepatic or renal function (avoid if severe) and dehydration. Do not use in patients with stomach ulcers. Do not take together with other paracetamol-containing products. Taking too many products containing paracetamol may be harmful and you should get medical advice straight away even if you do not feel ill. There is a possible association between aspirin and Reye's Syndrome when given to children. Reye's Syndrome is a very rare disease, which affects the brain and liver and can be fatal. For this reason aspirin

should not be given to children under 16 years. Do not exceed the stated dose. **Side effects:** Side effects are mild and infrequent, aspirin and paracetamol: Bronchospasm and skin reactions may occur in hypersensitive patients. Isolated reports of thrombocytopenic purpura, methaemoglobinaemia and agranulocytosis. Aspirin: There is a high incidence of GI irritation with slight asymptomatic blood loss. Increased bleeding time. May induce GI haemorrhage. May precipitate gout in susceptible individuals. Possible risk of Reye's Syndrome in children under 16 years. Caffeine: high doses can cause tremor and palpitations. **Effects on ability to drive and use machines:** None stated. **Incompatibilities:** None stated. **Use during pregnancy and lactation:** Not to be used in late pregnancy and when breastfeeding. **Pharmaceutical precautions:** No special precautions. **Shelf life:** 2 years. **Legal category:** 8, 12 and 16 tablet packs, GSL, 32 tablet packs, P. **Package quantities and prices RRP:** Blister packs of: 8 tablets RRP £1.30, 12 tablets RRP £1.80, 16 tablets RRP £2.25, 32 tablets RRP £3.35. **Marketing authorisation no.:** PL 00165/5013R. **Marketing authorisation holder:** Whitehall Laboratories Limited trading as Wyeth Consumer Healthcare, Huntercombe Lane South, Taplow, Maidenhead Berkshire SL6 0PH. **Date of preparation:** July 2005. \* Trade Mark

**Reference:** 1. Anadin Extra 16's IRI 1st October 2005. OTC value sales.

Introducing...



**Phone: 0845 111 0151**

**Email: [info@askanadin.co.uk](mailto:info@askanadin.co.uk)**

**Internet: [www.askanadin.co.uk](http://www.askanadin.co.uk)**

**PAINLESS PHARMACY SUPPLY**

For further information call 0845 111 0151.

Wyeth Consumer Healthcare, Maidenhead SL6 0PH.



# Driving analgesic sales forward

By categorising the different types of analgesic user into five groups, Wyeth says pharmacists can boost sales



Wyeth Consumer Healthcare – maker of Anadin – says that understanding shopper needs is the key to boosting sales of OTC painkillers.

From its largest ever usage and attitude research project, the company has identified five types of analgesic user:

**1. 'Frequents'** (7 per cent of analgesic users, 37 per cent market value). Knowledgeable high users, wanting information and advice about their condition, products and safety. Usually older, female and non-working.

**2. 'Use nows'** (23 per cent users, 20 per cent market). Infrequent pain sufferers, who make distress purchases and are prepared to pay more for brands they recognise from the nearest outlet. Often young, male and full-time workers.

**3. 'Be prepareds'** (49 per cent users, 28 per cent

market). Organised, light users, who will stock up during regular grocery shops on well-known brands they trust. Tend to be female, over 35 years old, and living in households with children.

**4. 'Value seekers'** (21 per cent users, 15 per cent market). Light users who understand ingredients and seek special offers or own-brand products. The majority are women who are buying for the family and need something that suits everyone.

**5. 'Non-users'** (30 per cent of the overall population are non-buyers, and half of these are non-users). Either the very young who suffer fewer ailments, or the elderly who obtain painkillers on prescription. Often unwilling to take OTC medicines.

Wyeth says its research highlights the potential for community pharmacy to increase its market

share. 'Frequents' seek advice on ailments and products, and though they tend to stick to tried and tested remedies, are open to innovations such as new ingredients (particularly those perceived as safer, more effective or long-lasting) and combinations. As high users, they are likely to keep painkillers in different places – at work, in the car, at home – so are open to the idea of compact and mobile packs.

By comparison, 'Use nows' are less inclined to spend time at the pharmacy counter. For this group of patients, speed and convenience is of prime importance, so the GSK and P pain fixtures should be easy to identify and shop. Small pack sizes of big brands in convenient to use formats and packaging are likely to be popular, as is siting bottled water for sale nearby, advises Wyeth.



No safety concerns were considered to be unmanageable and therefore the benefits of taking Prexige were judged to outweigh the risk

## A new Cox-2: logic or lunacy?

Prexige (lumiracoxib) 'gives doctors another option', says Novartis

Novartis Pharmaceuticals' decision to launch a new Cox-2 inhibitor at the end of last year may – at first sight – have seemed a little odd. After all, only 16 months earlier Merck had pulled Vioxx (rofecoxib) from the market after it became apparent that long-term use could put patients at increased risk of problems such as heart attacks and strokes. This was soon followed by the withdrawal of Pfizer's Bextra (valdecoxib) after the drug was linked with serious, sometimes fatal, skin reactions.

Both the UK and European drug regulators were quick to issue guidance, restricting the use of Cox-2s in certain patient groups, and recommending that prescribers use only the lowest effective doses for the shortest possible duration of treatment. So what gave Novartis the confidence to release Prexige (lumiracoxib) to the UK market for osteoarthritis and acute pain?

According to the Medicines and Healthcare products Regulatory Agency, the clinical data it received before licensing demonstrated that lumiracoxib was an effective painkiller. It added: "There were no safety concerns that were considered to be unmanageable and therefore the benefits of taking Prexige were judged to outweigh the risk."

Based on a number of extensive tests that involved animals, healthy volunteers and patients,

the MHRA concluded that, compared to NSAIDs, lumiracoxib reduced the incidence of gastrointestinal ulcers or complications, and did not put patients at increased risk of CV or renal events, or serious skin reactions. However, there did appear to be a dose-related link with serious hepatic events. Once marketing authorisation was granted, the organisation took the unusual step of publishing the full details of its licensing assessment.

For its part, Novartis points out that no other Cox-2 had such a firmly established risk/benefit profile when approved. However, the company is not resting on its laurels and has implemented the Lumiracoxib Post-Launch Pharmacovigilance Plan to monitor usage, assess risk and communicate information to doctors and pharmacists that will ensure patient safety is maintained.

To date, Prexige has gained approval in 22 countries and been launched in two. Tim Cave, UK medical director for Novartis, says: "It gives doctors another option, particularly for patients who are at risk of GI adverse events, and patients who are not at risk of any cardiovascular disease. Uptake has been good – we're very pleased." And reassuringly, Dr Cave adds: "There has been nothing unexpected in the adverse event reports."

For more information: [www.tinyurl.com/f566s](http://www.tinyurl.com/f566s)

## THE SALES POTENTIAL IS OUTSTANDING...

The Propain® brands are growing\* and we recognise that this is down to pharmacists' recommendation. Both Propain® and Propain® Plus are pharmacy only medicines and we are therefore ensuring that we support pharmacy with a new campaign driving consumers through your door and giving you the tools to detail the Propain® range.

\* 01/06 MAT 12% Growth

From May there will be

- ▶ Focused ongoing national advertising
- ▶ Eye catching point of sale and PCA information
- ▶ New packaging – clearly defining the two skus

Ensure you stock Propain® for powerful migraine relief and Propain® Plus for tension headache relief.

## MAKE SURE YOU'RE READY...

For more information: Sales - ask your Laser representative or call Ceuta Healthcare on 01202 780558  
Medical information or to report adverse events, contact - Sandoz Ltd., 37 Woolmer Way, Bordon, Hampshire, GU35 9QE, 01420 478301 or refer to SPC.



**Propain® Caplets:** paracetamol 400 mg; codeine phosphate 10 mg; diphenhydramine hydrochloride 5 mg; caffeine anhydrous 50 mg.

**Propain® Plus:** paracetamol 450 mg; doxylamine succinate 5 mg; caffeine anhydrous 30 mg; codeine phosphate 10 mg.

0207 921 8124

Booking and copy date  
12 noon Monday prior  
to Saturday publication  
subject to availability

**Contact:**

Arny Turner  
Chemist + Druggist (Classified),  
CMP Information Ltd  
Ludgate House  
245 Blackfriars Road  
London SE1 9UY

T: 0207 921 8124

F: 0207 921 8130

www.dotpharmacy.co.uk  
c&dsales@cmpinformation.com

Buy one get one free on all  
recruitment advertisements  
booked for May 2006

## Recruitment

**Pharmacy, W10**

Near Ladboke Grove tube station

3 Full Time Vacancies  
Opening hours 9am – 7pm

**Full Time Qualified Dispenser**  
with rotational Saturday's

**Pharmacy Assistant/ Technician**  
Preferably with dispensary experience.  
with rotational Saturday's

**Healthcare Assistant**

To apply, please send a letter of application and CV to:

Nelly Amin  
106 Golborne Road  
London  
W10 5PS



## Clinical Development Manager

**£competitive + benefits - Field based**

Part of Celesio, we're the European leader in pharmaceutical distribution, and as the UK wholesale arm, AAH's role is key to the success of the group. Delivering daily to hospitals, dispensing doctors and retail pharmacies from our national network of branches, we pride ourselves on building strong relationships and maintaining customer satisfaction.

We are seeking a Clinical Development Manager to join our innovative Customer Technology team; responsible for delivering state of the art products that make life easier and generate value for all our AAH customers.

Serving across the 4 home counties, your role will be to ensure that the LINK portfolio's clinical efficacy and relevance is maintained whilst supporting pharmacy best and common practice. You will be accountable for, and act as a channel to the various governmental/professional/academic bodies and deliver a definitive answer when required.

It is essential that you have a full understanding of our industry, the clinical impact of pharmacy's emerging role and a pragmatic insight into how a dispensary functions. However, your success in this role will be determined by your ability to work effectively under pressure in a mission critical environment, your confidence to challenge the status quo and your ability to manage customers in both clinical and commercial terms whilst remaining energetic and committed.

You will also need to be clinically qualified to at least dispensing technician level and hold a management qualification at diploma level.

We can offer an attractive salary and benefits including pension and staff discount. Please send your CV and salary details to: Rebecca Lowe, HR Advisor, AAH Pharmaceuticals, Sapphire Court, Walsgrave Triangle, Coventry CV2 2TX.  
E-mail: rebecca.lowe@aaah.co.uk

Closing date for all applications: 12th May 2006

We are an Equal Opportunities Employer  
No Agencies please

AAH

## DISPENSING ASSISTANT/PHARMACY TECHNICIAN - LONDON N15

Required for refitted branch of Safedale Pharmacy Group. Experience and team work essential to support pharmacist in developing new roles.

Salary dependent on experience.

Contact Stewart at [stewart@safedale-ltd.co.uk](mailto:stewart@safedale-ltd.co.uk)  
or Tel: 02088036222



## 3 Full Time Pharmacists and 1 Full Time Dispenser Required Leicester

3 Full time pharmacists and  
1 full time dispenser required  
to work within a 40 mile radius  
of Leicester.

Excellent pay and conditions.  
Bonus scheme available.

To apply please contact:  
**Mr Taha Ali on 0116 2662334**  
and send your CV to  
[cv.locums@goolemail.com](mailto:cv.locums@goolemail.com)

## Locum agencies

**Guaranteed Locums**

- Guaranteed Locums
- Guaranteed Cover
- Guaranteed Good Quality Locums
- Nationwide Cover
- Terms and Conditions Available.

Tel: 07770 628791

Fax: 01268 781623

Email: [Natlocum@aol.com](mailto:Natlocum@aol.com)



## Locum agencies



**HAVE YOU CONSIDERED  
LOCUMING?  
WHY NOT REGISTER FREE TODAY?**

**Tel: 0121 525 5348**

Pharmacy locums and technicians required in All AREAS.

**www.nationwidelocums.co.uk**

**...the pharmacy locum solution**

## Businesses Wanted

## THINKING OF SELLING YOUR PHARMACY!

- We have approximately 1,000 serious purchasers willing to pay top prices.
- This means that you can expect several offers for your business enabling us to obtain the best price achievable.
- We expect to achieve 10% – 20% more than you will obtain if trying to sell your pharmacy yourself.
- We only introduce serious purchasers who have signed confidentiality agreements.

Call **Anne Hutchings** today for a **confidential** discussion and a **free valuation**.

If you prefer to call in the evening or weekend please call Anne's personal mobile

**07810 561665**

**Hutchings Consultants Ltd**

Pharmacy business sales and valuations

**Tel: 01494 722224**

**www.pharmacyexperts.com**

email: **anne@hutchingsandco.com**



## COHENS CHEMIST GROUP



Pharmacy chain looking to expand in the North-West & West Yorkshire areas.

Best prices paid, all turnovers/size of groups considered. please contact Colin Counce on 07966 524162 or

## Buying a pharmacy?

Ease the cash flow pains of starting up.

FastFlow for Pharmacy enables you to receive immediate payment for your NHS dispensing.

Contact Andy on Freephone

**0808 144 5554**

or E-mail: **info@pharmacypartners.com**

Web: **www.pharmacypartners.com**



## Businesses Wanted

## Selling your business?



Our progressive chain of over 100 is keen to acquire pharmacies in the area shown, leasehold or freehold.

Call Tony Hough on 020 8689 2255 ext 221, or mobile 07740 878836.

All enquiries treated in strictest confidence.

Doy Lewis House, 324 Bensham Lane, Thornton Heath, Surrey CR7 7EQ

email: **tonyhough@doylewisplc.com** Fax: 020 8689 0076

**www.daylewisplc.com**



Kenallin DYL124



## Adam Myers

For all your healthcare needs

A small group looking to acquire shops in the Midlands, covering Gloucestershire, Herefordshire, Shropshire, Staffordshire, Warwickshire, Worcestershire and surrounding areas.

All turnovers considered, all information treated with strictest confidence and a high premium paid.

For a quick decision please contact Mr Bhandal on 07710 574890

E-mail: **csb@adammyers.co.uk**



## MANOR PHARMACY



Pharmacy Group looking to expand and acquire shops in the North-West & North/West Yorkshire areas.

All turnovers/ size of group considered.

High Premium Paid. All Information will be treated with the strictest confidence.

Please contact Mohamed on 07958 428754 or Talha Patel on 07841 328394

## Products and services

## OTOSAN

THE WORLD'S FAVOURITE EAR CONE

Otosan Ear Cones are the natural and safe way of removing the build up of earwax and other waste deposits to improve your hearing.

2 million sold throughout the world in 20 countries

3 unique safety features recommended by Europe's top ENT Surgeons

Manufactured for 16 years and with CE Certification



**OTOSAN**  
CONE FOR EAR CARE



To stock Otosan products and for further information

tel **0870 4211718** or email **sales@malozzadistribution.com**



## DO NOT MISS THIS OPPORTUNITY TO PROFIT BY £1000.00

(offer ends 31 May 2006)

◆ **New members** joining CAMRx in May will qualify for **£1000.00 free generic stock** at DTF value

Plus

Obtain up to **11.5% discount** on your **eligible medical purchase**



Have benefit of **fully subsidised** computer hardware, monthly software, installation and training package **worth £4,400.00**



◆ Gain benefit of **share of profits** without having to invest **your own money** in a **share purchase scheme**

For further details contact Phillipa Capon, in Customer Care on 01530 510520 quoting reference **CDMAY**

**CAMRx**  
Pharmacy Development Group



CAMBRIAN • ALLIANCE LTD

## The Buying Groups for Independents

We are confident that the majority of Independent Pharmacies will be financially better off joining Cambrian Alliance.

If you would like more information please contact Wendy Demaid on 01792 791798



**fluid... fashion**

- Undoubtedly the largest fragrance range (over 2000 Lines)
- The very latest lines sourced immediately
- Extensive Clarins, Clinique & Lancome Skincare ranges
- Nationwide next day delivery
- Help and advice from market leaders in **fluid... fashion**

For Price List requests, please call FREEphone 0800 542 0442 or visit [www.knights-fragrances.co.uk](http://www.knights-fragrances.co.uk)

**Mashco**  
Photo, Electrical & Perfumes

**Polaroid**  
MAY'06 SPECIAL OFFERS



**Polaroid 125i Passport Photo Super Value Pack**

CODE: POLSKRVALPK

- Includes 200 shots + 20 FOC on pack
- £0.56 PER PRINT
- IP: £128.22

**NET: £125/-**

**Polaroid Digital 200 Pack Thermal Media Film**

CODE: POLMEDSUPVALPK

- Includes 200 shots and 200 wallets
- £0.34 PER PRINT
- IP: £69.75

**NET: £68/-**



Tel: 020 8204 2224 [www.mashco.com](http://www.mashco.com) Email: [sales@mashco.com](mailto:sales@mashco.com) Fax: 020 8204 0224

CODE NET PRICES ARE AFTER SETTLEMENT DISCOUNT 2.5%. GOODS SUBJECT TO AVAILABILITY. VAT AT STANDARD RATE.

**POSITIVE SOLUTIONS LIMITED**

## ETP ON THE HORIZON? BRIDGE THE GAP WITH PSI

Positive Solutions Limited  
EPOS and PMR  
you connected to ETP

Call: 01254 833 338

or email [solutions@positive.co.uk](mailto:solutions@positive.co.uk)

Positive Solutions Ltd  
5th Floor, House of Commons  
[www.positive-solutions.co.uk](http://www.positive-solutions.co.uk)

## Shopfitting

### Planning a re-fit? Adding a new consulting room?

Why go into debt with all the pressures of repayments and security? Use the alternative source of funding that's designed for growing pharmacy businesses.

Contact Andy on Freephone:

**0808 144 5554**

or E-mail: [info@pharmacypartners.com](mailto:info@pharmacypartners.com)

Web: [www.pharmacypartners.com](http://www.pharmacypartners.com)

**pharmacy partners**  
the power to prosper



## Shopfitting

**RAPEED** design  
shop fitters

the total shop fitting solution



T: 020 8655 2020 // F: 020 8655 3444 // [www.raped.co.uk](http://www.raped.co.uk)

## Tax Consultants &amp; Accountants

## DO YOU HAVE THESE SYMPTOMS?

- Large tax bills? ☐
- An accountant who is not proactive? ☐
- A desire to pay less tax? ☐

Call us **NOW** we have the remedy  
Phone: 01494 722224

[www.pharmacyexperts.com](http://www.pharmacyexperts.com)

**h**  
& Co.

Hutchings & Co.

The Leading Tax  
Consultants  
For Retail  
Pharmacists.

## Tax Consultants &amp; Accountants

## THINKING OF BUYING A PHARMACY?



*Modiplus went the extra mile to assist me in the purchase of my pharmacy ...*

### MODIPLUS SUCCESSFULLY:

- Helped with the structure to minimise tax
- Dealt with solicitors on purchase contracts and tax issues
- Dealt with the selling agents to avoid time delays
- Advised me on purchase of goodwill or shares
- Advised me on specialist finance schemes such as Unichem, AAH & Phoenix
- Projected my profit & cash-flow
- Allocated purchase price to maximise tax

*... excellent team of people who are always helpful and friendly.*

MR R SUDDHI T/A MARKEATON PHARMACY, DERBY

For more information or for a **FREE** consultation please call Umesh or Jay:

**LONDON: Umesh 020 7383 3200**

**MANCHESTER: Jay 0161 980 0770**

[www.modiplus.co.uk](http://www.modiplus.co.uk)

Member of Silver Levene Group

THE ONLY REGULATED FIRM OF CHARTERED ACCOUNTANTS AND TAX ADVISERS SPECIALISING IN RETAIL PHARMACIES



**modiplus**  
ADDING VALUE



# Atul Patel is marathon man

London pharmacist raises over £1k in first ever marathon



**Atul Patel, of Classic Pharmacy, London SE1,** pictured with his niece Tulsi, daughters Vishali and Shivani and son Rushi, ran the Flora London Marathon in 4hr, 19min, 22sec. He raised £1,150.13 for PhabKids, a charity that helps disabled children obtain equipment for sporting activities. Main sponsors were Ambe Medical, Sigma

Pharmaceuticals, and pharmacists in Lambeth and Southwark, as well as local residents. "It was my first marathon although I've been running for four years, mainly 10K races, and I've done a half marathon," said Mr Patel, 38. "I only did 12 weeks' training with runs along the Embankment to Tower Bridge and speed training in Battersea."

## Seeking support for Peaks Challenge



**Genus Pharmaceuticals is taking to the great outdoors in support of Arthritis Care.**

Nick Simpson (far left), brand manager at Genus (a company perhaps better known for generic products and sponsorship of C+D's Pharmacy Update), has recruited his brothers Mark, of Abbot Laboratories, and Adrian, of Sanofi Aventis – pictured centre and right – to the 'Genus Climbing Team'.

The trio form part of an eight-man team that plans to take on the Three Peaks Challenge in support of Arthritis Care.

The Genus team hopes to raise more than £11,000 in support of the charity – that's more than £1 for every foot they climb of Ben Nevis, Scafell Pike and Mount Snowdon. If you would like to support the Three Peaks Challenge, contact Nick Simpson at Genus on 01635 568400.



**Shack attack:** Avicenna members at Betty's beach shack near the Leela hotel, Cavellossim, Goa, during the buying group's recent annual conference. Pictured from the left are pharmacists Hamif and Zubi Seedat; Sonya Dhalla, assistant editor at Pharmacy Business; Max Gosney, senior business reporter, C+D; Chris Hughes, national account manager at UniChem; and pharmacists Daksha and Atul Malde



**Hot Coles:** David Coles (right), managing director at UniChem, with his son Elliot (left), aka Matthew Hoggard, the England cricket star. The duo sport UniChem-donated Hawaiian shirts during a Colorama-sponsored beach barbecue at the Avicenna conference



**Beetlebum:** pharmacist Subhash Patel, from Ricky's Chemist in Ewell, Surrey, finds scaling the betel nut tree with bare hands and feet is best left to the professionals. Locals were sighted ascending trees with ease during the Avicenna group's visit to a spice plantation in Goa



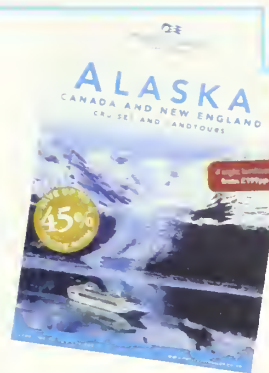
**EXCLUSIVE  
OFFER**

# PHARMACY TRAVEL

## PRINCESS CRUISES

- ➔ **Save up to 50% on selected cruises**
- ➔ **Up to 75% price reduction for children**

- ➔ **Guaranteed discounts on all other cruises**
- ➔ **UK connecting flights from only £50**



With **Princess Cruises** you can escape completely and enjoy 'personal choice cruising' which combines laid back American-style service and a relaxed informal atmosphere. As a sister line to P&O Cruises, **Princess** have a unique heritage and expertise which is reflected in the excellent service aboard their leading edge superliners. You can sail from Southampton to the Mediterranean or the Baltic and Iberian regions, or choose a fly-cruise package and discover magical Caribbean islands or the awesome and spectacular scenery of Alaska. **Flights transfers meals entertainment port taxes and much more are all included** in the price and there are fantastic facilities and special low prices for children and family groups.

**See prize details opposite for more information about Princess Cruises.**

RESERVATIONS/INFORMATION

**0845 331 6677**

- ➔ **Save 60% on airport car parking**
- ➔ **London hotels from £26 including breakfast**
- ➔ **Car hire to or from the airport from £89**
- ➔ **Show and stay theatre breaks from £49**
- ➔ **Airport coach and hotel packages from £45**

Recognising that essential holiday extras can add significantly to your overall holiday costs, Pharmacy Travel are now offering an increased range of cost savings in conjunction with **holidayextras**. Car parking and hotels at most UK airports, travel to the airport (including special packages including accommodation) and many other extras are available. With holidayextras you can also benefit from exceptional savings at many London hotels and take advantage of their excellent value for money 'show and stay' theatre break packages.

holidayextras  
make it easy going

RESERVATIONS/INFORMATION

**0845 331 6677**

holidayextras  
make it easy going

**Pharmacy Travel guarantees year-round savings**

A combination of generous discounts and exclusive offers always ensures excellent cost savings on:

- ✓ Activity holidays
- ✓ Airport hotels
- ✓ Airport car parking
- ✓ Airport VIP lounges
- ✓ All-inclusive resorts
- ✓ Beach clubs
- ✓ British holidays
- ✓ Camping holidays
- ✓ Car hire
- ✓ City breaks
- ✓ Coach holidays
- ✓ Country house hotels
- ✓ Cruises
- ✓ Escorted tours
- ✓ Farmhouses and gites
- ✓ Flights
- ✓ Fly-drive holidays
- ✓ Golfing breaks
- ✓ Health spas
- ✓ Hotel bookings
- ✓ Independent travel
- ✓ Motoring holidays
- ✓ Package holidays
- ✓ Safaris and treks
- ✓ Sailing and boating holidays
- ✓ Short breaks
- ✓ Ski holidays
- ✓ Tailor-made holidays
- ✓ Theatre & Concert breaks
- ✓ Travel insurance
- ✓ Villas and apartments

For further information call Pharmacy Travel

**0845 331 6677**



**ABTA**

holiday  
saver

Terms, conditions and booking deadlines apply. Exclusive offers are subject to availability and may be restricted to certain dates, locations/accommodation/travel arrangements etc. Bookings must be made through Pharmacy Travel. A service provided by Holidaysaver (ABTA 55821).

**For low cost travel insurance with excellent cover and many FREE extra holiday benefits and savings call Holidaysaver insurance services on 0845 331 6688**

CLINICALLY  
PROVEN  
PAIN  
RELIEF  
WITHOUT  
PILLS



# PIONEERING POWERFUL PHARMACY ONLY

**Ibuleve. The undisputed No.1 selling OTC topical NSAID brand**

- Unchallenged brand leader for 14 consecutive years
- Over **24 million** packs sold
- Unlike other brands, **Ibuleve is only sold in Pharmacy**
- The only one with **clinically proven effectiveness** to match oral ibuprofen (in soft tissue injuries)<sup>1</sup>
- Unique, advanced **penetrating formulation** can deliver up to **5x active ingredient**<sup>2</sup> compared to less sophisticated formulations of ibuprofen



Pioneering, Powerful and Pharmacy led. There is only one Ibuleve.

THE BEST SELLING OTC TOPICAL NSAID<sup>3</sup> FROM A COMPANY OF BRAND LEADERS

IBULEVE: Trademark and Product Name held by Dornier Pharmaceuticals Ltd, Maidenhead, RG1 1AA, UK. Distributed by DDD Ltd, 94 Rickmansworth Road, Watford, Herts, WD18 7JJ, UK. Indications: For the relief of backache, rheumatic and muscular pain, sprains and strains. Also for pain relief in osteoarthritis and rheumatoid arthritis. Directions: Lightly apply 2 to 5 cm of gel (50 to 125 mg ibuprofen) to the affected area. Massage gently until absorbed. Wash hands after use. Repeat as required up to three times daily. Contraindications: Hypersensitivity to any of the ingredients, or in cases of hypersensitivity to aspirin, ibuprofen or related painkillers (including when taken by mouth), especially where associated with a history of asthma, rhinitis or urticaria. Not to be used if you are pregnant or breastfeeding, or if you are taking other NSAIDs. Do not use if you have a history of peptic ulcer or other skin disease. Not to be used during pregnancy or lactation. Precautions: Not recommended for children under 12 years without medical advice. If symptoms worsen or persist, consult your doctor. Side-effects: In normal use, side-effects are very rare, but may include: dizziness, headache, nausea, indigestion, diarrhoea, skin irritation, allergic reactions, and in susceptible individuals renal and/or gastrointestinal side effects. Legal category: [P] Packs: Ibuleve Gel (PL 0173/0060) - 30g, RSP £4.25 (£3.62 inc VAT), and 50g, RSP £5.95 (£5.16 inc VAT). Ibuleve Maximum Strength Gel (PL 0173/0176) - 30g, RSP £5.45 (£4.64 exc VAT) and 50g, RSP £7.45 (£6.34 exc VAT). References: 1 Whitefield M, O'Kane CJA and Anderson S (2002) Comparative efficacy of a proprietary topical ibuprofen gel and oral ibuprofen in acute soft tissue injuries: a randomized, double-blind study. Journal of Clinical Pharmacy and Therapeutics 27, 409-417. 2 Hadgraft J, et al (2003) Skin Penetration of Topical Formulations of Ibuprofen 5%. An International Journal of Pharmaceutics and Applied Skin Physiology Vol 16, No 3, pp. 137-142. 3 Source: IRI, MAT October 2005, Value Sales, Total All Outlets.